2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L03000015001

GATÉWAY PIZZA NO.3, L.L.C.



FILED May 09, 2006 8:00 am Secretary of State

05-09-2006 90012 003 ****50.00

Principal Place of Business

1430 DEL PRADO BLVD SOUTH

1430 DEL PRADO BLVD SOUTH CAPE CORAL, FL 33904

CAPE CORAL, FL -33904 8347 Lock wood Proge R



04192006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 13-4248930

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

Daytime Phone #

6. Name and Address of Current Registered Agent

WEATHERFORD, WILLIAM PJR 1150 LOUISIANA AVENUE STE. 4 WINTER PARK, FL 32789

DO NOT WRITE IN THIS SPACE

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE		
	Signature, typed or printed name of registered agent and title if applicable. (NOTE: Regis	ered Agent signature required when reinstating) DATE
Filing Fee is \$50.00 Due by May 1, 2006		
9.	MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR MCGRATH, TIMOTHY W 15239 Kastrdn 1430 DEL PRADO BLVD SOUTH LITNING E1 .3354 CAPE CORAL, FL 33904	7
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO NOT WRITE
FITLE NAME STREET ADDRESS CITY-ST-ZIP		IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.		