


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 02, 2008 8:00 am
Secretary of State

04-02-2008 90149 009 ***138.75

DOCUMENT # L03000026991

1. Entity Name
G5 PROPERTIES, LLC



Principal Place of Business Mailing Address

8661 CAJUPUT COVE
 FORT MYERS, FL 33919 US



03072008 No Chg-LLC CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number
76-0737238

Applied For
 Not Applicable

5. Certificate of Status Desired \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

WINESETT, RICHARD W
 2248 FIRST STREET
 FORT MYERS, FL 33901

*Winesett, Richard
 2248 First St.
 Ft Myers, FL
 33901*

DO NOT WRITE IN THIS SPACE

8. The authorized 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, the registered agent.

SIGNATURE: _____ DATE: _____

(NOTE: Registered Agent signature required when reinstating)

FL. FEE IS \$138.75
After 12/08 Fee will be \$538.75

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-STATE-ZIP

GOROVY, MARK S
 8561 CAJUPUT COVE
 FORT MYERS, FL 33919

*Gorovy, Mark
 8561 Cajuput Cove
 Ft Myers Fl.*

DO NOT WRITE IN THIS SPACE

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.

SIGNATURE: *[Signature]* **DATE:** *3/15/08* **DAYTIME PHONE #:** *239-939-1444*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE