

**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jan 24, 2005 08:00 AM
Secretary of State

DOCUMENT # L03000033697 1. Entity Name GAUGE PROPERTIES, LLC	
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Principal Place of Business 2241 PECK STREET FORT MYERS, FL 33901	Mailing Address 2241 PECK STREET FORT MYERS, FL 33901
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DO NOT WRITE IN THIS SPACE



01142005 No Chg-LLC

CR2E083 (10/03)

4. FEI Number 56-2388658	Applied For Not Applicable
5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required	

6. Name and Address of Current Registered Agent

JOLLIFF, TRAVIS E SR
2241 PECK STREET
FORT MYERS, FL 33901

**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 must be inked and signed by the registered agent, and the filer must sign the certificate of status required with the filing)

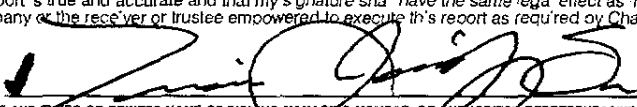
**Filing Fee is \$50.00
Due by May 1, 2005**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY ST ZIP	MGR JOLLIFF, TRAVIS E SR 2241 PECK STREET FORT MYERS, FL 33901
TITLE NAME STREET ADDRESS CITY ST ZIP	MGR JOLLIFF, PAMELA 2241 PECK STREET FORT MYERS, FL 33901
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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(c), 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 AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR AUTHORIZED REPRESENTATIVE