2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

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

DOCUMENT # L03000033697

1. Entity Name
GAUGE PROPERTIES, LLC

Principal Place of Business
2241 PECK STREET
FORT MYERS, FL 33901

Mailing Address
2241 PECK STREET
FORT MYERS, FL 33901

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 ______________________ DATE

Filing Fee is $50.00
Due by May 1, 2005

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	JOLLIFF, TRAVIS E SR
STREET ADDRESS	2241 PECK STREET
CITY ST ZIP	FORT MYERS, FL 33901
TITLE	MGR
NAME	JOLLIFF, PAMAELA
STREET ADDRESS	2241 PECK STREET
CITY ST ZIP	FORT MYERS, FL 33901
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	

000000194558
01/25/05-80105-019 50.00

DO NOT WRITE IN THIS SPACE

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 DATE