2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Apr 11, 2005 08:00 AM Secretary of State

ANNUAL REPORT				Apr 11, 2003 00.00	
DOCUMENT # L03000037739 1. Enlity Name GATEWAY CUSTOM BUILDERS, LLC				S	Secretary of Stat
		Mailing Address 1301 MELALEUCA LANE FORT MYERS, FL 33901	,) 	
				03142005No Chg-LLC	CR2E083 (10/03)
L	O NOT WRITE	IN 1HIS SPA		4. FEI Number 20-0584141 5. Certificate of Status Desired	Applied For Not Applicable \$5.00 Additional
				5. Certificate of Status Desired	Fee Required
FIX, BRETT 1301 MELALEUCA LANE FORT MYERS, FL 33901				DO NOT W IN THIS SI	
SIGNATURE.	Sgnature, hiped or printed name of registered agent a liling Fee is \$50.00 ue by May 1, 2005	nd tile if applicable. (NOTE: Registere)	d Agent a gnatura required	when renstating)	DATE
9.	MANAGING MEMBE	RS/MANAGERS	Solver or rest	a grandistant and all and a	e a nagyain surresser of the second services
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM FIX, BRETT M P 1301 MELALEUCA LANE FORT MYERS, FL 33901 MGRM AARON, CIAN VP 1301 MELALEUCA LANE	-		***	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	FORT MYERS, FL 33901		बुद्धार संस्थान विकास सम्बद्धाः विकास सम्बद्धाः स्टब्स्	DO NOT W	VRITE
name Street address City-St-Zip			ماقة مسمل لما يساد الملاط	IN THIS SI	· · · · · · · · · · · · · · · · · · ·
TITLE NAME STREET ADDRESS CITY-ST-ZIP					

11. I hereby certify that the information supplied with this filling 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:

NAME STREET ADDRESS

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

1417105

Daytime Phone #