

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000006367

FILED
Jul 07, 2005
Secretary of State

Entity Name: GARY D. SCHATZ, L.L.C.

Current Principal Place of Business:

250 BASIN DRIVE
FT LAUDERDALE, FL 33308

New Principal Place of Business:

1040 BAYVIEW DRIVE
318
FT LAUDERDALE, FL 33304

Current Mailing Address:

250 BASIN DRIVE
FT LAUDERDALE, FL 33308

New Mailing Address:

1040 BAYVIEW DRIVE
318
FT LAUDERDALE, FL 33304

FEI Number: 59-3778188 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

SCHATZ, GARY D
250 BASIN DRIVE
FT LAUDERDALE, FL 33308 US

Name and Address of New Registered Agent:

SCHATZ, GARY D
1 LAS OLAS CIRCLE
207
FT LAUDERDALE, FL 33316 US

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.

SIGNATURE: GARY SCHATZ

07/07/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: SCHATZ, GARY
Address: 250 BASIN DRIVE
City-St-Zip: FT LAUDERDALE, FL 33308

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: SCHATZ, GARY
Address: 1040 BAYVIEW DRIVE 318
City-St-Zip: FT LAUDERDALE, FL 33316

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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: GARY SCHATZ

PRES

07/07/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date