2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Mar 07, 2007 8:00 am

Daytime Phone #

DOCUMENT # L04000026853 1. Entity Name GATEWAY HOUSING GROUP, LLC						03-07-2007 90215 037 ****50.00				
Principal Place of Business 2164 15TH CIRCLE NORTH ST. PETERSBURG, FL 33713		Mailing Address 2164 15TH CIRCLE NORTH ST. PETERSBURG, FL 33713		,) U & 1 (rada silaba Bhasa n		
2. Principal P	Place of Business - No P.O. Box #	3. Mailing Address								
Suite, Apt. #, etc.		Suite, Apt. #, etc.		02022007	Chg-LLC	CR2E	083 (12/06)			
City & State		City & State		4. FEI Numb 20-104			}	plied For		
Zip Country		Zip Country		ntry		of Status Desired		\$5.00 Add		
	6. Name and Address of Current I	Registered Agent		<u> </u>	7. Name and	Address of New F	enistered			
				Name						
DEPUGH, R.V. 2164 15TH CIRCLE NORTH				Street Address	Address (P.O. Box Number is Not Acceptable)					
ST. PETE	RSBURG, FL 33713								- 	
<u> </u>				City			Fl	Zip Cod	e	
	named entity submits this statement for tions of registered agent.	the purpose of changing it	s register	ed office or regist	tered agent, or bo	th, in the State of Fl	orida. I am	familiar with,	and accept	
SIGNATURE .	Signature, typed or presed name of registered agent a	nd title if applicable. (NO	TE: Requisions	id Agent eigneture requi	red when remeating)		DATE			
Filing Fee is \$50.00 Due by May 1, 2007				Make check payable to Florida Department of State						
Fi	lling Fee Is \$50.00 ue by May 1, 2007								•	
9.	liting Foe Is \$50.00 ue by May 1, 2007 MANAGING MEMBE	RS/MANAGERS	10.			Florid	a Departn	nent of Stat	•	
D	ue by May 1, 2007	RS/MANAGERS	10.	£			a Departn	nent of Stat	● Addition	
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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 legisl effect as if made under oath; that I am a managing member or manager of the timited liability company or the receiver or trustee empowered to execute this report as jequited by Chapter 608, Florida Statutes.

SIGNATURE: