

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000060336

**FILED**  
**Apr 26, 2012**  
**Secretary of State**

**Entity Name:** GATES OPERATING HOLDING COMPANY, LLC

**Current Principal Place of Business:**

12810 TAMIAMI TRAIL NORTH  
NAPLES, FL 34110

**New Principal Place of Business:**

27599 RIVER VIEW CENTER BLVD.  
SUITE 205  
BONITA SPRINGS, FL 34134

**Current Mailing Address:**

12810 TAMIAMI TRAIL NORTH  
NAPLES, FL 34110

**New Mailing Address:**

P.O. BOX 2328  
BONITA SPRINGS, FL 34133

**FEI Number:** 20-1828629

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

GATES, TODD E  
12810 TAMIAMI TRAIL NORTH  
NAPLES, FL 34110 US

**Name and Address of New Registered Agent:**

GATES, TODD E  
27599 RIVER VIEW CENTER BLVD.  
SUITE 205  
BONITA SPRINGS, FL 34134 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: TODD E. GATES

04/26/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: CRAWFORD, RICHARD S  
Address: 999 VANDERBILT BEACH ROAD SUITE 610  
City-St-Zip: NAPLES, FL 34108

Title: MGR  
Name: WATCHOWSKI, DALE  
Address: ONE TOWN SQUARE, #1600  
City-St-Zip: SOUTHFIELD, MI 48076

Title: MGR  
Name: GATES, TODD E  
Address: P.O. BOX 2328  
City-St-Zip: BONITA SPRINGS, FL 34133

I hereby 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: TODD E. GATES

MGR

04/26/2012

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