

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000093284

FILED
Mar 03, 2009
Secretary of State

Entity Name: GATEWAY DEVELOPERS OF LAKE CITY, LLC

Current Principal Place of Business:

2806 W US 90, SUITE 101
LAKE CITY, FL 32055

New Principal Place of Business:

2806 W US 90
SUITE 101
LAKE CITY, FL 32055

Current Mailing Address:

2806 W US 90, SUITE 101
LAKE CITY, FL 32055

New Mailing Address:

PO BOX 3659
LAKE CITY, FL 32056

FEI Number: 20-2222207

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CRAPPS, DANIEL
2806 US HIGHWAY 90 WEST STE 101
LAKE CITY, FL 32055 US

Name and Address of New Registered Agent:

CRAPPS, DANIEL
2806 W US 90
SUITE 101
LAKE CITY, FL 32055 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:

03/03/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: CRAPPS, DANIEL
Address: 2806 W US 90, SUITE 101
City-St-Zip: LAKE CITY, FL 32055

Title: MGRM () Delete
Name: EAGLE, THOMAS H
Address: 116 NW EGRET LANE
City-St-Zip: LAKE CITY, FL 32055

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: CRAPPS, DANIEL
Address: PO BOX 3659
City-St-Zip: LAKE CITY, FL 32056

Title: MGRM (X) Change () Addition
Name: EAGLE, THOMAS H
Address: 258 NW BERT AVE
City-St-Zip: LAKE CITY, FL 32055

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: DANIEL CRAPPS

MGMR

03/03/2009

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