2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 26, 2012
Secretary of State

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Entity Name: GATES BUTZ INSTITUTIONAL CONSTRUCTION, LLC

Current Principal Place of Business:

27599 RIVERVIEW CENTER BLVD - SUITE 205
BONITA SPRINGS, FL 34134 US

New Principal Place of Business:

Current Mailing Address:

27599 RIVERVIEW CENTER BLVD - SUITE 205
BONITA SPRINGS, FL 34134 US

New Mailing Address:

FEI Number: 33-1110994 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

GATES, TODD E
27599 RIVERVIEW CENTER BLVD - SUITE 205
BONITA SPRINGS, FL 34134 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGR
Name: GATES, TODD E
Address: 27599 RIVERVIEW CENTER BLVD - SUITE 205
City-St-Zip: BONITA SPRINGS, FL 34134 US

Title: MGR
Name: BUTZ, GREG L
Address: P.O. BOX 509
City-St-Zip: ALLENTOWN, PA 18105 US

Title: P
Name: HAYES, JOHN A
Address: 27599 RIVERVIEW CENTER BLVD - SUITE 205
City-St-Zip: BONITA SPRINGS, FL 34134 US

Title: T
Name: MAAS, JEFFERY T
Address: 27599 RIVERVIEW CENTER BLVD - SUITE 205
City-St-Zip: BONITA SPRINGS, FL 34134 US

Title: S
Name: KLOPP, FRED A
Address: 27599 RIVERVIEW CENTER BLVD - SUITE 205
City-St-Zip: BONITA SPRINGS, FL 34134 US

Title: VP
Name: BUTZ, LEE A
Address: P.O. BOX 509
City-St-Zip: ALLENTOWN, PA 18105 US

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 Statues.

SIGNATURE: TODD E. GATES MGR 04/26/2012

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