

# **2006 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000032937

**FILED**  
**Apr 24, 2006**  
**Secretary of State**

**Entity Name:** SGS GABLES PROPERTIES, LLC

**Current Principal Place of Business:**

9955 NORTH KENDALL DRIVE, STE. 205  
MIAMI, FL 33176

**New Principal Place of Business:**

**Current Mailing Address:**

9955 NORTH KENDALL DRIVE, STE. 205  
MIAMI, FL 33176

**New Mailing Address:**

**FEI Number:** 20-2618073

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FIELDSTONE, RONALD R  
201 ALHAMBRA CIRCLE STE. 601  
CORAL GABLES, FL 33134 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: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: MGMR ( ) Change (X) Addition  
Name: STEVEN, SCHIFF MGRM  
Address: 9955 N. KENDAL DR., SUITE 205  
City-St-Zip: MIAMI, FL 33176 US

I hereby certify that the information supplied with this filing does not qualify for the 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:** STEVEN SCHIFF

MGMR

04/24/2006

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