

# 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000074249

FILED  
Jan 08, 2010  
Secretary of State

**Entity Name:** GAMMA LOI PROPERTIES, L.L.C.

**Current Principal Place of Business:**

60 SOUTH GULF BLVD  
ENGLEWOOD, FL 34224

**New Principal Place of Business:**

60 SOUTH GULF BLVD  
PLACIDA, FL 33946

**Current Mailing Address:**

MICHAEL MALOY  
P.O. BOX 490  
PLACIDA, FL 33946

**New Mailing Address:**

FEI Number: 20-3228586      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

MALOY, MICHAEL K  
60 SOUTH GULF BLVD  
PLACIDA, FL 33946      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: MGRM  
Name: MALOY, MICHAEL  
Address: 60 SOUTH GULF BLVD  
City-St-Zip: PLACIDA, FL 33946

Title: MGRM  
Name: MERCHANT, SHERMAN  
Address: 440 QUAIL RIDGE ROAD  
City-St-Zip: HENRICO, NC 27842

Title: MGRM  
Name: MERCHANT, SUSAN  
Address: 440 QUAIL RIDGE ROAD  
City-St-Zip: HENRICO, NC 27842

Title: MGRM  
Name: MALOY, GAIL M  
Address: 60 SOUTH GULF BLVD  
City-St-Zip: PLACIDA, FL 33946

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: MICHAEL K MALOY      MGMR      01/08/2010

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