

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000102661

FILED
Feb 06, 2006
Secretary of State

Entity Name: GATOR MARKETING & LOGISTICS, LLC

Current Principal Place of Business:

1505 FORT CLARK BLVD.
APT 4-302
GAINESVILLE, FL 32606

New Principal Place of Business:

605 NW 53RD AVE
SUITE A6
GAINESVILLE, FL 32609

Current Mailing Address:

1505 FORT CLARK BLVD.
APT 4-302
GAINESVILLE, FL 32606

New Mailing Address:

605 NW 53RD AVE
SUITE A6
GAINESVILLE, FL 32609

FEI Number: 20-3663412

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

A1A REGISTERED AGENT INC.
92 SADBERRY ROAD
QUINCY, FL 32351 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 () Delete
Name: VAN DIJK, CHRISTIAN V
Address: 1505 FORT CLARK BLVD APT 4-302
City-St-Zip: GAINESVILLE, FL 32606

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: VAN DIJK, CHRISTIAN T
Address: 1505 FORT CLARK BLVD APT 4-302
City-St-Zip: GAINESVILLE, FL 32606 US

Title: MGR () Change (X) Addition
Name: CORDERY, ANDREW M
Address: 1505 FT CLARKE BLVD APT 4302
City-St-Zip: GAINESVILLE, FL 32606 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: CHRISTIAN T. VAN DIJK

MGR

02/06/2006

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