

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000108144

FILED  
Jan 08, 2008  
Secretary of State

Entity Name: GATEWAY RESORT LLC

## Current Principal Place of Business:

350 TANGERINE AVE  
3  
MERRITT ISLAND, FL 32953 US

## New Principal Place of Business:

350 TANGERINE AVE  
SUITE 3  
MERRITT ISLAND, FL 32953 US

## Current Mailing Address:

350 TANGERINE AVE  
3  
MERRITT ISLAND, FL 32953 US

## New Mailing Address:

350 TANGERINE AVE  
SUITE 3  
MERRITT ISLAND, FL 32953 US

FEI Number: 02-0764852

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SHERIDAN GROUP LLC  
350 TANGERINE AVE  
3  
MERRITT ISLAND, FL 32953 US

## Name and Address of New Registered Agent:

SHERIDAN GROUP LLC  
350 TANGERINE AVE  
SUITE 3  
MERRITT ISLAND, FL 32953 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: CHARLES M. SHERIDAN

01/08/2008

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: SHERIDAN GROUP LLC,  
Address: 350 TANGERINE AVE  
City-St-Zip: MERRITT ISLAND, FL 32953 US

Title: MGRM ( ) Delete  
Name: SHERIDAN, CHARLES M  
Address: 350 TANGERINE AVE  
City-St-Zip: MERRITT ISLAND, FL 32953 US

Title: MGRM ( ) Delete  
Name: SHERIDAN, TRICIA B  
Address: 350 TANGERINE AVE  
City-St-Zip: MERRITT ISLAND, FL 32953 US

## ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition  
Name: SHERIDAN GROUP LLC,  
Address: 350 TANGERINE AVE SUITE 3  
City-St-Zip: MERRITT ISLAND, FL 32953 US

Title: MGR (X) Change ( ) Addition  
Name: SHERIDAN, CHARLES M  
Address: 350 TANGERINE AVE SUITE 3  
City-St-Zip: MERRITT ISLAND, FL 32953 US

Title: MGR (X) Change ( ) Addition  
Name: SHERIDAN, TRICIA B  
Address: 350 TANGERINE AVE SUITE 3  
City-St-Zip: MERRITT ISLAND, FL 32953 US

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: CHARLES M SHERIDAN

MGR

01/08/2008

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