2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Aug 04, 2006
Secretary of State

DOCUMENT# L05000112937

Entity Name: V AND V GATEWAY HOLDINGS, LLC

Current Principal Place of Business:

8801 COLLEGE AVE
SUITE 1
FORT MYERS, FL 33919

New Principal Place of Business:

Current Mailing Address:

2 POWELL CT
GLEN MILLS, PA 19342

New Mailing Address:

FEI Number: 20-3837265 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

CABRERA, SAMIR
8801 COLLEGE AVE
FORT MYERS, FL 33919 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:	VITELLI, PATRICK J	
Address:	2 POWELL CT	
City-St-Zip:	GLEN MILLS, PA 19342	
Title:	MGRM	( ) Delete
Name:	VITELLI, DAVID	
Address:	39 DEBORAH DR	
City-St-Zip:	MILLVILLE, NJ 08332	
Title:	MGRM	( ) Delete
Name:	VINCENZO, JOHN	
Address:	3323 TUNISON DR	
City-St-Zip:	WILMINGTON, DE 19810	

ADDITIONS/CHANGES:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

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: PATRICK VITELLI MGR 08/04/2006

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