

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000001931

FILED
Apr 13, 2009
Secretary of State

Entity Name: THE GABLES DEVELOPMENT GROUP AT GAINESVILLE, LLC

Current Principal Place of Business:

2801 FLORIDA AVE., SUITE 14
COCONUT GROVE, FL 33133

New Principal Place of Business:

Current Mailing Address:

2801 FLORIDA AVE., SUITE 14
COCONUT GROVE, FL 33133

New Mailing Address:

FEI Number: 20-4067469

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WENZEL, PETER
2801 FLORIDA AVE., SUITE 14
COCONUT GROVE, FL 33133 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: WENZEL, PETER
Address: 2801 FLORIDA AVE #14
City-St-Zip: COCONUT GROVE, FL 33133

Title: MGR () Delete
Name: BURMAN, GARY
Address: 2801 FLORIDIA AVE #14
City-St-Zip: COCONUT GROVE, FL 33133

ADDITIONS/CHANGES:

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 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: GARY BURMAN

MGR

04/13/2009

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