

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000038740

**FILED**  
**Apr 29, 2008**  
**Secretary of State**

**Entity Name:** GABEL PROPERTY GROUP OF FLORIDA, LLC

**Current Principal Place of Business:**

705 LAKE AVE  
LAKE WORTH, FL 33460 US

**New Principal Place of Business:**

**Current Mailing Address:**

6269 NW 33 AVE.  
BOCA RATON, FL 33496 US

**New Mailing Address:**

**FEI Number:** **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

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

GABEL, JO ELLEN MEMBER  
6269 NW 33 AVE.  
BOCA RATON, FL 33496 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 ( ) Delete  
Name: GABEL, AUDREY  
Address: 29 DUER PLACE  
City-St-Zip: WEEHAWKEN, NJ 07086 US

**ADDITIONS/CHANGES:**

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: AUDREY GABEL

MGRM

04/29/2008

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