

**2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000013184

**FILED  
Jan 13, 2010  
Secretary of State**

**Entity Name:** GAVINATOR, LLC

**Current Principal Place of Business:**

690 NORTH SUNSET DRIVE  
MT. DORA, FL 32757 US

**New Principal Place of Business:**

**Current Mailing Address:**

690 NORTH SUNSET DRIVE  
MT. DORA, FL 32757 US

**New Mailing Address:**

**FEI Number:** 26-4240369

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MOREY, LAWRENCE J JR.  
690 NORTH SUNSET DRIVE  
MT. DORA, FL 32757 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  
Name: MOREY, LAWRENCE J JR.  
Address: 690 NORTH SUNSET DRIVE  
City-St-Zip: MT. DORA, FL 32757 US

Title: MGRM  
Name: MOREY, CATHY L  
Address: 690 NORTH SUNSET DRIVE  
City-St-Zip: MT. DORA, FL 32757 US

I hereby 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: LAWRENCE J MOREY, JR.

MGRM

01/13/2010

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