

# 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000082782

Entity Name: GASLIGHT VILLAGE LLC

FILED  
Jan 24, 2010  
Secretary of State

## Current Principal Place of Business:

5588 HAMMOCK ISLES DRIVE  
NAPLES, FL 34119 US

## New Principal Place of Business:

23850 VIA ITALIA CIRCLE  
#1806  
BONITA SPRINGS, FL 34134 US

## Current Mailing Address:

5588 HAMMOCK ISLES DRIVE  
NAPLES, FL 34119 US

## New Mailing Address:

23850 VIA ITALIA CIRCLE  
#1806  
BONITA SPRINGS, FL 34134 US

FEI Number: 20-0044557

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

KLISTON, TODD W  
8211 W BROWARD BLVD  
STE 375  
PLANTATION, FL 33324 US

## Name and Address of New Registered Agent:

WILSON, KATHLEEN  
23850 VIA ITALIA CIRCLE  
#1806  
BONITA SPRINGS, FL 34134 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: KATHLEEN WILSON

01/24/2010

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM  
Name: WILSON, MICHAEL R  
Address: 23850 VIA ITALIA CIRCLE - #1806  
City-St-Zip: BONITA SPRINGS, FL 34134 US

Title: MGRM  
Name: WILSON, KATHLEEN W  
Address: 23850 VIA ITALIA CIRCLE - #1806  
City-St-Zip: BONITA SPRINGS, FL 34134 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: KATHLEEN WILSON

MGRM

01/24/2010

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