

2008 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L98000000901

FILED
Jan 30, 2008
Secretary of State

Entity Name: GATEWAY INSURANCE AGENCY, L.C.

Current Principal Place of Business:

2430 WEST OAKLAND PARK BOULEVARD
FT. LAUDERDALE, FL 33311

New Principal Place of Business:

Current Mailing Address:

2430 WEST OAKLAND PARK BOULEVARD
FT. LAUDERDALE, FL 33311

New Mailing Address:

FEI Number: 65-0845230

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STANTON, DAVID D
2430 W. OAKLAND PARK BLVD
FORT LAUDERDALE, FL 33311 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: WEINBERG, MICHAEL J
Address: 2430 WEST OAKLAND PARK BULD.
City-St-Zip: FORT LAUDERDALE, FL 33311

Title: MGRM () Delete
Name: GIA MANAGEMENT SERVI, CES, L.C.
Address: 2430 WEST OAKLAND PARK BOULEVARD
City-St-Zip: FT. LAUDERDALE, FL 33311

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: JERUE, KIRCHEN, CAMP, ANO, L.C.
Address: 3200 FLIGHTLINE DRIVE, SUITE 202
City-St-Zip: LAKE LAND, FL 33811

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: DAVID D. STANTON

MGMR

01/30/2008

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