

**2005 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Jan 11, 2005 08:00 AM**  
**Secretary of State**

DOCUMENT # L99000000492

1. Entity Name  
GRADLER REALTY, LLC



Principal Place of Business  
2077 NORTH POWERLINE ROAD, SUITE 2  
POMPANO BECH, FL 33069

Mailing Address  
2077 NORTH POWERLINE ROAD, SUITE 2  
POMPANO BECH, FL 33069

**DO NOT WRITE IN THIS SPACE**



01062005No Chg-LLC

CR2E083 (10/03)

4. FEI Number  
22-3631894

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

WICH, THOMAS M  
WICH, WICH, & WICH, P.A.  
2400 E. COMMERCIAL BLVD., SUITE 620  
FORT LAUDERDALE, FL 33308

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IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$50.00  
Due by May 1, 2005**

**9. MANAGING MEMBERS/MANAGERS**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
MGRM  
GRASSO, ANTHONY  
1968 NORTHEAST 7TH STREET  
DEERFIELD BEACH, FL 33441

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
MGRM  
ADLER, STEVE  
2 REDWOOD DRIVE  
MALBORRO, NJ 07446

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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IN THIS SPACE**

U00000177311  
01/11/05-90031-024 50.00

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

STEVE ADLER

mgem

1/6/05

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