




2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 03, 2004 8:00 am
Secretary of State

05-03-2004 90141 045 ****50.00

DOCUMENT # L99000008741 1. Entity Name GATES MCVEY REALTY, L.L.C.																													
Principal Place of Business C/O STEVE ROBINSON 5405 PARK CENTRAL COURT NAPLES, FL 34109			Mailing Address C/O STEVE ROBINSON 5405 PARK CENTRAL COURT NAPLES, FL 34109																										
2. Principal Place of Business 12810 Tamiami Trail N. Suite, Apt. #, etc.			3. Mailing Address 12810 Tamiami Trail N. Suite, Apt. #, etc.																										
City & State Naples, FL Zip 34110 Country USA			City & State Naples, FL Zip 34110 Country USA																										
4. FEI Number 65-0967059			Applied For <input type="checkbox"/> Not Applicable																										
5. Certificate of Status Desired <input type="checkbox"/>			\$5.00 Additional Fee Required																										
6. Name and Address of Current Registered Agent CAUDILL, JAMES F 2640 GOLDEN GATE PKWY #115 NAPLES, FL 34105			7. Name and Address of New Registered Agent Name Stephen V. Robison Street Address (P.O. Box Number is Not Acceptable) 12810 Tamiami Trail N. City Naples FL Zip Code 34110																										
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  Stephen V. Robison 4-7-04 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>																													
Filing Fee is \$50.00 Due by May 1, 2004			Make check payable to: Florida Department of State																										
9. MANAGING MEMBERS/MANAGERS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%;">TITLE</td> <td style="width:60%;">NAME</td> <td style="width:30%; text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>MGRM GATES MCVEY CAPITAL GROUP, L.L.C.</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>5405 PARK CENTRAL COURT</td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td>NAPLES, FL 34109</td> <td></td> </tr> </table>			TITLE	NAME	<input type="checkbox"/> Delete	NAME	MGRM GATES MCVEY CAPITAL GROUP, L.L.C.		STREET ADDRESS	5405 PARK CENTRAL COURT		CITY - ST - ZIP	NAPLES, FL 34109		10. ADDITIONS/CHANGES <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%;">TITLE</td> <td style="width:60%;">NAME</td> <td style="width:30%; text-align: right;"><input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td>12810 Tamiami Trail N.</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>naples, FL 34110</td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td></td> <td></td> </tr> </table>			TITLE	NAME	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	NAME	12810 Tamiami Trail N.		STREET ADDRESS	naples, FL 34110		CITY - ST - ZIP		
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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. Stephen V. Robison 4-7-04 239-593-3777 SIGNATURE:  4-7-04 239-593-3777 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #</small>																													