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SECRETARY OF STATE
TALLAHASSEE FLORIDA

**2003 LIMITED LIABILITY COMPANY
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # L99000009006 1. Entity Name GASS REAL ESTATE HOLDINGS, LLC																																																																																																																																																											
Principal Place of Business 2000 NE JENSEN BEACH BLVD JENSEN BEACH, FL 34957			Mailing Address P.O. BOX 1289 PALM CITY, FL 34991																																																																																																																																																								
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.																																																																																																																																																									
City & State		City & State		4. FEI Number 65-0968609 ☐ CHECK HERE IF MAKING CHANGES																																																																																																																																																							
Zip		Country		5. Certificate of Status Desired ☒ \$65.00 Additional Fee Required																																																																																																																																																							
6. Name and Address of Current Registered Agent SOMMERS, MICHAEL C 2000 JENSEN BEACH BLVD JENSEN BEACH, FL 34957				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code																																																																																																																																																							
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				DATE 8/29/03																																																																																																																																																							
NOTE: Registered Agent's Signature does not constitute an assumption of liability.																																																																																																																																																											
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th colspan="3" style="text-align: left;">9. MANAGING MEMBERS/MANAGERS</th> <th colspan="3" style="text-align: left;">10. ADDITIONS/CHANGES</th> </tr> </thead> <tbody> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 45%;">NAME</td> <td style="width: 10%; text-align: center;">☐ Delete</td> <td style="width: 15%;">TITLE</td> <td style="width: 45%;">NAME</td> <td style="width: 10%; text-align: center;">☐ Change ☐ Addition</td> </tr> <tr> <td>STREET ADDRESS</td> <td>SOMMERS, MICHAEL C</td> <td></td> <td>STREET ADDRESS</td> <td>09/02/03-01069-001</td> <td></td> </tr> <tr> <td>CITY-STATE-ZIP</td> <td>2000 N.E. JENSEN BEACH ROAD</td> <td></td> <td>CITY-STATE-ZIP</td> <td>JENSEN BEACH, FL 34957</td> <td></td> </tr> <tr> <td></td> <td>JENSEN BEACH, FL 34957</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td>MGRM</td> <td></td> <td>TITLE</td> <td>09/02/03-01069-001</td> <td></td> </tr> <tr> <td>NAME</td> <td>ANSOA, PHILIP SR</td> <td></td> <td>NAME</td> <td>09/02/03-01069-001</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>2000 N.E. JENSEN BEACH ROAD</td> <td></td> <td>STREET ADDRESS</td> <td>JENSEN BEACH, FL 34957</td> <td></td> </tr> <tr> <td>CITY-STATE-ZIP</td> <td>JENSEN BEACH, FL 34957</td> <td></td> <td>CITY-STATE-ZIP</td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td>MGRM</td> <td></td> <td>TITLE</td> <td>400022702524</td> <td></td> </tr> <tr> <td>NAME</td> <td>GREENE, ROBERT</td> <td></td> <td>NAME</td> <td>03/02/03-01069-001</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>2000 N.E. JENSEN BEACH ROAD</td> <td></td> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-STATE-ZIP</td> <td>JENSEN BEACH, FL 34957</td> <td></td> <td>CITY-STATE-ZIP</td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td></td> <td>TITLE</td> <td></td> <td></td> </tr> <tr> <td>NAME</td> <td></td> <td></td> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-STATE-ZIP</td> <td></td> <td></td> <td>CITY-STATE-ZIP</td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td></td> <td>TITLE</td> <td></td> <td></td> </tr> <tr> <td>NAME</td> <td></td> <td></td> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-STATE-ZIP</td> <td></td> <td></td> <td>CITY-STATE-ZIP</td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>						9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES			TITLE	NAME	☐ Delete	TITLE	NAME	☐ Change ☐ Addition	STREET ADDRESS	SOMMERS, MICHAEL C		STREET ADDRESS	09/02/03-01069-001		CITY-STATE-ZIP	2000 N.E. JENSEN BEACH ROAD		CITY-STATE-ZIP	JENSEN BEACH, FL 34957			JENSEN BEACH, FL 34957					TITLE	MGRM		TITLE	09/02/03-01069-001		NAME	ANSOA, PHILIP SR		NAME	09/02/03-01069-001		STREET ADDRESS	2000 N.E. JENSEN BEACH ROAD		STREET ADDRESS	JENSEN BEACH, FL 34957		CITY-STATE-ZIP	JENSEN BEACH, FL 34957		CITY-STATE-ZIP									TITLE	MGRM		TITLE	400022702524		NAME	GREENE, ROBERT		NAME	03/02/03-01069-001		STREET ADDRESS	2000 N.E. JENSEN BEACH ROAD		STREET ADDRESS			CITY-STATE-ZIP	JENSEN BEACH, FL 34957		CITY-STATE-ZIP									TITLE			TITLE			NAME			NAME			STREET ADDRESS			STREET ADDRESS			CITY-STATE-ZIP			CITY-STATE-ZIP									TITLE			TITLE			NAME			NAME			STREET ADDRESS			STREET ADDRESS			CITY-STATE-ZIP			CITY-STATE-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)(f), Florida Statutes. I further certify that the information included 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 886, Florida Statutes.																																																																																																																																																											
SIGNATURE:				DATE 8/29/03 800-800-2400																																																																																																																																																							
SIGNATURES MUST BE PRINTED OR PRINTED NAME OF SIGNED INDIVIDUAL BEING A REPRESENTATIVE OF AUTHORIZED REPRESENTATIVE																																																																																																																																																											