

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M03000002636

FILED  
Apr 20, 2004  
Secretary of State

**Entity Name:** NORTH PORT GATEWAY, LLC

**Current Principal Place of Business:**

2524 OSPREY AVE. S.  
SARASOTA, FL 34239

**New Principal Place of Business:**

**Current Mailing Address:**

2524 OSPREY AVE. S.  
SARASOTA, FL 34239

**New Mailing Address:**

FEI Number: 55-0836052

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

MENKE, FRANK III  
2524 OSPREY AVE. S.  
SARASOTA, FL 34239

**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/MEMBERS:**

Title: MGRM ( ) Delete  
Name: MENKE, FRANK III  
Address: 2524 OSPREY AVE. S.  
City-St-Zip: SARASOTA, FL 34239

Title: MGRM ( ) Delete  
Name: FULLENKAMP, DENNIS J  
Address: 2911 NE PINE ISLAND ROAD  
City-St-Zip: CAPE CORAL, FL 33909

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: FRANK MENKE III

MGRM

04/20/2004

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