

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M07000005773

**FILED**  
**Apr 26, 2012**  
**Secretary of State**

**Entity Name:** SCI GATEWAY AT GLADES FUND 30, LLC

**Current Principal Place of Business:**

11620 WILSHIRE BOULEVARD, 10TH FL.  
LOS ANGELES, CA 90025

**New Principal Place of Business:**

3415 SOUTHWEST 39TH BLVD  
GAINSVILLE, FL 32608

**Current Mailing Address:**

11620 WILSHIRE BOULEVARD, 10TH FL.  
LOS ANGELES, CA 90025

**New Mailing Address:**

3415 SOUTHWEST 39TH BLVD  
GAINSVILLE, FL 32608

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 US

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 US

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: ADAM COOPER

04/26/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: NEAL HANDEL LIVING TRUST DATED 10.20.1989  
Address: 13400 RIVERSIDE DRIVE, SUITE 101  
City-St-Zip: SHERMAN OAKS, CA 91423

I hereby 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: NEAL HANDEL, M.D.

MGRM

04/26/2012

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