

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# Z00366

FILED  
Apr 24, 2006  
Secretary of State

Entity Name: GATOR 175TH STREET, L.C.

**Current Principal Place of Business:**

1595 NE 163RD STREET  
N. MIAMI BCH., FL 33162

**New Principal Place of Business:**

**Current Mailing Address:**

1595 NE 163RD STREET  
N. MIAMI BCH., FL 33162

**New Mailing Address:**

FEI Number: 65-0279015

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

GOLDSMITH, JAMES A.  
1595 NE 163RD STREET  
N. MIAMI BCH., FL 33162 US

**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/MANAGERS:**

Title: MGR ( ) Delete  
Name: GOLDSMITH, JAMES A.,  
Address: 1595 NE 163RD STREET  
City-St-Zip: N. MIAMI BCH., FL 33162

Title: MGR ( ) Delete  
Name: GOLDSMITH, WILLIAM,  
Address: 1595 NE 163RD STREET  
City-St-Zip: N. MIAMI BCH., FL 33162

Title: MGR ( ) Delete  
Name: MISKA, S. DOUGLAS,  
Address: 1595 NE 163RD STREET  
City-St-Zip: N. MIAMI BCH., FL 33162

**ADDITIONS/CHANGES:**

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

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 Chapter 119, 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: JAMES A GOLDSMITH

MGR

04/24/2006

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