

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000100457

**Entity Name:** GATOR RAKE, LLC

**Current Principal Place of Business:**

4001 EXCHANGE AVE  
NAPLES, FL 34104

**Current Mailing Address:**

4001 EXCHANGE AVE  
NAPLES, FL 34104 US

**FEI Number:** 27-1362546

**Certificate of Status Desired:** No

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

MADAFFER, TONY  
3614 TOMLINSON STREET  
BONITA SPRINGS, FL 34134 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Authorized Person(s) Detail :**

Title MGRM  
Name MADAFFER, TONY  
Address 3614 TOMLINSON STREET  
City-State-Zip: BONITA SPRINGS FL 34134

*I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** TONY MADAFFER

MANAGER

02/25/2018

\_\_\_\_\_ Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_ Date