


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 22, 2008 08:00 AM
Secretary of State

DOCUMENT # L06000119137

1. Entity Name
GTE INVESTMENTS LLC



Principal Place of Business Mailing Address

12636 NICOLE LANE TAMPA, FL 33625 US **12636 NICOLE LANE TAMPA, FL 33625 US**

DO NOT WRITE IN THIS SPACE



01122008 No Chg-LLC CR2E083 (12/07)

4. FEI Number
20-8056908 Applied For
 Not Applicable

5. Certificate of Status Desired **\$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

EISINGER, KEVIN
12636 NICOLE LANE
TAMPA, FL 33625

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B. 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM TOLLEY, MICHAEL P.O. BOX 56480 SAINT PETERSBURG, FL 33732
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM EISINGER, KEVIN P.O. BOX 56480 SAINT PETERSBURG, FL 33732
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM GONZALEZ, RICHARD P.O. BOX 56480 SAINT PETERSBURG, FL 33732
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM TOLLEY, SIMONE P.O. BOX 56480 SAINT PETERSBURG, FL 33732
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM GONZALEZ, LAURA P.O. BOX 56480 SAINT PETERSBURG, FL 33732
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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 01/23/08-80073-017 138.75

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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated 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 608, Florida Statutes.

SIGNATURE: *Kevin Eisinger* 1/16/08 913-963-0162

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #