

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000053404

FILED
May 05, 2009
Secretary of State

Entity Name: GFTF, LLC

Current Principal Place of Business:

2914 SOUTH SHERIDAN WAY
SUITE 301
OAKVILLE, ONTARIO, CANADA, ON L6J7L8 CN

New Principal Place of Business:

Current Mailing Address:

2914 SOUTH SHERIDAN WAY
SUITE 301
OAKVILLE, ONTARIO, CANADA, ON L6J7L8 CN

New Mailing Address:

FEI Number: 98-0582675 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

PATRICIA LEBOW, P.A.
ONE NORTH CLEMATIS STREET
SUITE 500
WEST PALM BEACH, FL 33401 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: REDMOND, ANDY
Address: 2914 SOUTH SHERIDAN WAY, SUITE 301
City-St-Zip: OAKVILLE, ONTARIO, CANADA, ON L6J7L8 CN

Title: MGR () Delete
Name: MILLAR, GEORGE
Address: 2820 ST. JOHN'S SD. ROAD
City-St-Zip: NEWMARKET, ONTARIO, CANADA, ON L3Y4W1 CN

Title: MGR () Delete
Name: SHAVER, STEPHEN
Address: 2914 SOUTH SHERIDAN WAY, SUITE 301
City-St-Zip: OAKVILLE, ONTARIO, CANADA, ON L6J7L8 CN

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 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: STEPHEN JOHNSTON

CFO

05/05/2009

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