


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 25, 2008 08:00 AM
Secretary of State

DOCUMENT # M99000000559


1. Entity Name
 GMFS, L.L.C.



Principal Place of Business
 7389 FLORIDA BLVD., SUITE 200A
 BATON ROUGE, LA 70806

Mailing Address
 7389 FLORIDA BLVD., SUITE 200A
 BATON ROUGE, LA 70806

DO NOT WRITE IN THIS SPACE



01162008 No Chg-LLC CR2E083 (12/07)

4. FEI Number 72-1441479	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

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

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8. 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

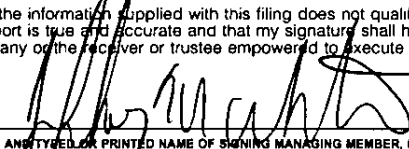
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 05/15/08-80004-007 138.75

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM BROWN, J. TERRELL JR 7389 FLORIDA BLVD., SUITE 200A BATON ROUGE, LA 70806
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM D'ARMOND, THOMAS W 7389 FLORIDA BLVD., SUITE 200A BATON ROUGE, LA 70806
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM BROWN, TERRELL SR. 7389 FLORIDA BLVD., SUITE 200A BATON ROUGE, LA 70806
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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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:  _____

Date: 4-24-08 Daytime Phone #: 225-214-5018