

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000000761

**Entity Name:** GSD VENTURES, LLC

**Current Principal Place of Business:**

9799 OLD ST AUGUSTINE ROAD  
JACKSONVILLE, FL 32257

**Current Mailing Address:**

9799 OLD ST AUGUSTINE ROAD  
JACKSONVILLE, FL 32257

**FEI Number:** 45-4158002

**Certificate of Status Desired:** No

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

HILL, KATISHA  
9799 OLD ST AUGUSTINE ROAD  
JACKSONVILLE, FL 32257 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 AUTHORIZED MEMBER  
Name RONALD&BEVERLY LEGRAND  
TENANTS BY ENTIRETY  
Address 5490 GREENLAND ROAD  
City-State-Zip: JACKSONVILLE FL 32258

Title MANAGER  
Name HILL, KATISHA D  
Address 9799 OLD ST AUGUSTINE ROAD  
City-State-Zip: JACKSONVILLE FL 32257

*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:** MELANIE MOORE

**BOOKKEEPER**

**04/23/2014**

Electronic Signature of Signing Authorized Person(s) Detail

Date