

**2009 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A10987

**FILED  
Feb 16, 2009  
Secretary of State**

**Entity Name:** GCB ASSOCIATES, LTD.

**Current Principal Place of Business:**

5760 S. SEMORAN BLVD.  
ORLANDO, FL 32822

**New Principal Place of Business:**

**Current Mailing Address:**

5760 S. SEMORAN BLVD.  
ORLANDO, FL 32822

**New Mailing Address:**

**FEI Number:** 59-2161732      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

LIEW, CHRIS  
5760 S. SEMORAN BLVD.  
ORLANDO, FL 32822    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

**GENERAL PARTNER INFORMATION:**

Document #: 698570  
Name: SPARKKNIGHT (US), INC.  
Address: 5760 S. SEMORAN BLVD  
City-St-Zip: ORLANDO, FL 32822 US

**ADDRESS CHANGES ONLY:**

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 General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes.

SIGNATURE: CHRIS LIEW

\_\_\_\_\_  
Electronic Signature of Signing General Partner

PRES

02/16/2009

\_\_\_\_\_  
Date