

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Feb 12, 2007 08:00 AM
Secretary of State

DOCUMENT # L00000006448

1. Entity Name
GB, L.L.C.



Principal Place of Business
1975 TAMiami TRAIL
PUNTA GORDA, FL 33950

Mailing Address
1975 TAMiami TRAIL
PUNTA GORDA, FL 33950



02012007 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-1021630

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

BAILLARGEON, LINDA
1428 CAPRICORN BLVD.
PUNTA GORDA, FL 33983

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IN THIS SPACE**

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 _____

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**Filing Fee is \$50.00
Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM BAILLARGEON, GILLES 1428 CAPRICORN BLVD. PUNTA GORDA, FL 33983
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM BAILLARGEON, LINDA 1428 CAPRICORN BLVD. PUNTA GORDA, FL 33983
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02/21/07-80055-008 50.00

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IN THIS SPACE**

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: *Linda Baillargeon*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

2/7/2007 941-575