


2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

07 JAN 25 AM 7:46

DOCUMENT # L00000009919	
1. Entity Name GDR MANAGEMENT LLC	

Principal Place of Business 800 SEMORAN PARK DR WINTER PARK, FL 32792	Mailing Address 800 SEMORAN PARK DR WINTER PARK, FL 32792
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DO NOT WRITE IN THIS SPACE



01042007 No Chg-LLC CR2E083 (11/05)

4. FEI Number 52-2268967	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent ABRIOLA, GARY 800 SEMORAN PARK DRIVE WINTER PARK, FL 32792

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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 <u>Hary Abriola</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating.)</small>	DATE <u>1-15-07</u>

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

900086797079
01/31/07--01012--013 **50.00

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR ABRIOLA, GARY 800 SEMORAN PARK DRIVE WINTER PARK, FL 32792
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR ABRIOLA, RONALD V 800 SEMORAN PARK DRIVE WINTER PARK, FL 32792
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR ABRIOLA, DENNIS J 800 SEMORAN PARK DRIVE WINTER PARK, FL 32792
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

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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: <u>Hary Abriola</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE</small>	DATE <u>1-15-07</u> <small>Date</small>	DAYTIME PHONE # <small>Daytime Phone #</small>
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