

**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Mar 04, 2005 8:00 am
Secretary of State

03-04-2005 90016 037 ****50.00

DOCUMENT # L00000011347

1. Entity Name
GKB HOLDINGS, LLC



Principal Place of Business
% ATLANTIA HOLDINGS
645 EAST DANIA BEACH BLVD.
DANIA BEACH, FL 33004

Mailing Address
% ATLANTIA HOLDINGS
645 EAST DANIA BEACH BLVD.
DANIA BEACH, FL 33004

20010103



01212005 No Chg-LLC

CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-1069582

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

BLACKBURN, ACE J JR.
COONEY, MATTSO, LANCE, BLACKBURN ET AL.
2312 WILTON DRIVE
FT. LAUDERDALE, FL 33305

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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, 2005**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGRM
BLACKBURN, A.
645 E. DANIA BEACH BLVD.
DANIA BEACH, FL 33004

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGRM
WAGNER, J.
645 E. DANIA BEACH BLVD.
DANIA BEACH, FL 33004

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGRM
MORFIDIS, G.
645 E. DANIA BEACH BLVD.
DANIA BEACH, FL 33004

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGRM
ECONOMOU, C.
645 E. DANIA BEACH BLVD.
DANIA BEACH, FL 33004

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 exemption stated in Section 119.07(3)(i), 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: _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

2-8-05

Date Daytime Phone #