2008 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

DO NOT WRITE IN THIS SPACE

DOCUMENT # L00000016147

1. Entity Name GMP, LLC

FILED Apr 21, 2008 08:00 A Secretary of State

Principal Place of Business

1207 DANIELS RD.

WINTER GARDEN, FL 34787

Mailing Address

426 BULTER ST

WINDERMERE, FL 34786



04142008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 59-3694169

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

SHAW, SUSAN D 426 BUTLER ST WINDERMERE, FL 34786

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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. Lam familiar with, and accept the obligations of registered agent.

Signature, typoid or printed nacre of registered acrest and title if applicable

(NOTE: Hegistered Agent signature required when reinstating)

U000009088\$£

FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75

05/06/08-80044-024 138.75

9.	MANAGING MEMBERS/MANAGERS
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P DANIELS, DAVID 812 CENTERBROOK DR. BRANDON, FL 33511
TITLE NAME STREET ADDRESS CHY-ST-ZIP	VP SHAW, SUSAN 426 BUTLER ST. WINDERMERE, FL 34786
TITLE NAME STREET ADDRESS CITY-SI-ZIP	S SHAW, SUSAN 426 BUTLER ST. WINDERMERE, FL 34786
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T DANIELS, DAVID 812 CENTERBROOK DR. BRANDON, FL 33511
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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SIGNATURE:

Susan D. Shawks Susan D. Shawks 4-15-08

^{11.} Thereby 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.