2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L00000016305

FILED Mar 07, 2008 8:00 am Secretary of State 03-07-2008 90226 001 ***138.75

1. Entity Name GCEC, AS							
Principal Place of Business 7152 COCO SABAL LA FORT MYERS, FL 33908 Mailing Address 7152 COCO SABAL LA FORT MYERS, FL 33908		3	- 601324				
2. Principal Place of Business - No P.O. Box #		3. Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.		01312008 Chg-LL	.C CR2E083 (12/	06)	
City & State		City & State		4. FE! Number 65-1065568		Applied For Not Applicable	
Zip	Country	Zip	Country	5. Certificate of Status D	Fee Re	Additional quired	
	6. Name and Address of Current	Registered Agent	Name	7. Name and Address o	f New Registered Agent		
PENUEL, JAMES W JR 7152 COCA SABAL LANE FORT MYERS, FL 33908				Street Address (P.O. Box Number is Not Acceptable)			
			City		FL T	Code	
the obligati	named entity submits this statement fi	or the purpose of changing its r	egistered office or regist	ered agent, or both, in the Sta	ate of Florida. 1 am familiar	with, and accept	
SIGNATURE .	Signature, typed or printed same of registered agen	t and title if applicable. (NOTE:	: Registered Agent signature requir	ed when reinstating)	DATE		
	E NOWIII FEE IS \$138.75 y 1, 2008 Fee will be \$538.7				Make check payable Florida Department of		
9.	MANAGING MEMB	ERS/MANAGERS	10.	ADD	DITIONS/CHANGES		
TITLE NAME	ST PENUEL, JAMES	☐ Delete	TITLE NAME		□ Cha	ange 🔲 Addition	
STREET ADDRESS CITY-ST-ZIP	7152 COCA SABAL LN FORT MYERS, FL 33908		STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V YUDELMAN, PAUL L 7152 COCA SABAL LN FORT MYERS, FL 33908	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ Ch	ange Addition	
	V V	Oelete	TITLE			ange 🗀 Addition	
NAME STREET ADDRESS CITY-ST-ZIP	O'KONSKI, MARK S 7152 COCA SABAL EN FORT MYERS, FL 33908	LJ Usiele	NAME STREET ADDRESS CITY-ST-ZIP		- -	ange Audition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V DADRAT, ANDREE A 7152 COCA SABAL LN FORT MYERS, FL 33908	, 🔲 Delete	NAME STREET ADDRESS CITY-ST-ZIP		□ Ch	ange Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V HERRERA, JUAN G 7152 COCA SABAL LANW FORT MYERS, FL 33908	☐ Delete	TITLE NAME STREET ADDRESS CITY-S1-ZIP		□ Ch	ange	
TITLE NAME		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<u> </u>	ange 🔲 Addition	
STREET ADDRESS City-St-Zip			· ·				
CITY-ST-ZIP 11. I hereby indicated	certify that the information supplied wid on this report is true and accurate ar ability company or the receiver or trust	nd that my signature shall have :	the exemptions contained the same legal effect as	if made under oath; that I am apter 608, Florida Statutes.	a managing member or ma	e information anager of the	
CITY-ST-ZIP 11. I hereby indicated	d on this report is true and accurate an ability company or the receiver or trust	nd that my signature shall have lee empowered to execute this	the exemptions containe the same legal effect as report as required by Ch	if made under oath; that I am apter 608, Florida Statutes. MES Pervired 4 01	a managing member or ma	Î ? 3 ?	

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