



2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

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

DOCUMENT # L02000017984	
1. Entity Name GPTK OF FLORIDA, LLC	

Principal Place of Business 1560 MATTHEW DR., STE. B FORT MYERS, FL 33907	Mailing Address 1560 MATTHEW DR., STE. B FORT MYERS, FL 33907
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DO NOT WRITE IN THIS SPACE

	
03272008 No Chg-LLC	CR2E083 (12/07)
4. FEI Number 65-1173863	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent GARCIA, MANUEL 1560 MATTHEW DR., STE. B FORT MYERS, FL 33907

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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. I am familiar with, and accept the obligations of registered agent.	
SIGNATURE <u>Manuel Garcia</u> <small>Signature, typed or printed name of registered agent and title if applicable</small>	DATE <u>3/28/08</u> <small>(NOTE: Registered Agent signature required when reissuing)</small>

FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75	U000000910853 05/07/08-80016-019 138.75
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9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM GARCIA, MANUEL 15851 RIVERCREEK CT ALVA, FL 33920
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM TAIT, PHILIP J 15400 NORTH PEBBLE LANE FORT MYERS, FL 33912
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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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>Manuel Garcia</u>	<u>MANUEL GARCIA</u>	<u>3/28/08</u>	<u>239-274-9124</u>
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE</small>		<small>Date</small>	<small>Daytime Phone #</small>