

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Jan 11, 2007 08:00 AM**  
**Secretary of State**

DOCUMENT # L03000010113

1. Entity Name  
GGI, LLC



Principal Place of Business

3910 U.S. HIGHWAY 301 NORTH, STE 140  
TAMPA, FL 33619

Mailing Address

3910 U.S. HIGHWAY 301 NORTH, STE 140  
TAMPA, FL 33619



01032007 No Chg-LLC

CR2E083 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number

59-3453881

Applied For

Not Applicable

5. Certificate of Status Desired



**\$5.00** Additional  
Fee Required

6. Name and Address of Current Registered Agent

CORPORATION COMPANY OF ORLANDO  
300 S. ORANGE AVE., SUITE 100 (JGH)  
ORLANDO, FL 32801

**DO NOT WRITE  
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, 2007**

9. MANAGING MEMBERS/MANAGERS

TITLE MGRM  
NAME MARRINER, BRUCE E  
STREET ADDRESS 3910 U.S. HIGHWAY 301 NORTH, STE 140  
CITY-ST-ZIP TAMPA, FL 33619

TITLE MGRM  
NAME LLEWELLYN, MARK T  
STREET ADDRESS 3910 U.S. HIGHWAY 301 NORTH, STE 140  
CITY-ST-ZIP TAMPA, FL 33619

TITLE MGRM  
NAME WHEELER, G. BRIAN-  
STREET ADDRESS 3910 U.S. HIGHWAY 301 NORTH, STE 140  
CITY-ST-ZIP TAMPA, FL 33619

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**DO NOT WRITE  
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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Bruce E. Marriner

Date

1/3/07

Daytime Phone #

813-620-4500