

**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 30, 2005 08:00 AM
Secretary of State

DOCUMENT # L03000020845

1. Entity Name
G.I.G., L.L.C.



Principal Place of Business
2085 COUNTY ROAD #740
WEBSTER, FL 33597-3907

Mailing Address
2085 COUNTY ROAD #740
WEBSTER, FL 33597-3907



04252005No Chg-LLC

CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
42-1595165

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

CLOUSE, ANDREW J
2085 COUNTY ROAD #740
WEBSTER, FL 33597-3907

**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, 2005**

9. MANAGING MEMBERS/MANAGERS

TITLE MGR
NAME CLOUSE, ANDREW J
STREET ADDRESS 2085 COUNTY ROAD #740
CITY - ST - ZIP WEBSTER, FL 335973907

TITLE MGR
NAME CLOUSE, RENAE K
STREET ADDRESS 2085 COUNTY ROAD #740
CITY - ST - ZIP WEBSTER, FL 335973907

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

U000000350052
05/02/05-80090-007 50.00

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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: X

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

4-28-05 352-793-6765

Date

Daytime Phone #