

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000031542

FILED  
Jul 22, 2007  
Secretary of State

Entity Name: GULFVEGAS, LLC

**Current Principal Place of Business:**

2109 WHALEY AVE.  
PENSACOLA, FL 32503

**New Principal Place of Business:**

**Current Mailing Address:**

2109 WHALEY AVE.  
PENSACOLA, FL 32503

**New Mailing Address:**

FEI Number: 20-0169397      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

**Name and Address of Current Registered Agent:**

**Name and Address of New Registered Agent:**

MANGRUM, MICHAEL J  
2109 WHALEY AVE.  
PENSACOLA, FL FL      US

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: MANGRUM, MICHAEL J  
Address: 2109 WHALEY AVE.  
City-St-Zip: PENSACOLA, FL 32503

Title: MGRM ( ) Delete  
Name: MCKINNON, DENIS  
Address: 1051 WONDERWOOD CT.  
City-St-Zip: PENSACOLA, FL 32514

Title: MGRM ( ) Delete  
Name: MOUGEY, PETER J  
Address: 501 COMMENDENCIA ST.  
City-St-Zip: PENSACOLA, FL 32501

Title: MGRM ( ) Delete  
Name: MRACHEK, PATRICK  
Address: 2485 TRONJO CIRCLE  
City-St-Zip: PENSACOLA, FL 32503

Title: MGRM ( ) Delete  
Name: VIDEAU, BRENT  
Address: 4530 FRANCISCO DRIVE  
City-St-Zip: PENSACOLA, FL 32504

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: MICHAEL J. MANGRUM

MGRM

07/22/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date