## **2008 LIMITED LIABILITY COMPANY ANNUAL REPORT**

## FILED Jan 31, 2008 08:00 AN **DOCUMENT # L03000036290 Secretary of State** 1. Entity Name G & G PROPERTIES, L.L.C. Mailing Address Principal Place of Business PO BOX 895397 11907 OCKLAWAHA DRIVE LEESBURG, FL 34789-5397 LESSBURG, FL 34788 01102008No Chg-LLC CR2E083 (12/07) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-4464796 Not Applicable \$5,00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent RICHEY, STEVEN J ESQ DO NOT WRITE 601 SOUTH NINTH STREET LESSBURG, FL 34748 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 it applicable (NOTE: Registered Agent signature required when reinstating) U00000807189 02/06/08-80071-023 138.75 FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75 MANAGING MEMBERS/MANAGERS 9. MGR MLE **DUPUIS, GARY J** NAME PO BOX 895397 STREET ADDRESS CITY-ST-ZIP LEESBURG, FL 347895397 MLE NAME STREET ADDRESS CITY-ST-ZIP IIILE NAME STREET ADDRESS DO NOT WRITE CITY ST-ZIP IN THIS SPACE IIILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP

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: