


**2006 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Apr 11, 2006 8:00 am**  
**Secretary of State**

04-11-2006 90013 020 \*\*\*150.00

<b>DOCUMENT # L03000037442</b> 1. Entity Name GSI & COMPANY, LLC	
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Principal Place of Business 261 SPIRNGVIEW COMMERCE DR. DEBARY, FL 32713	Mailing Address 261 SPIRNGVIEW COMMERCE DR. DEBARY, FL 32713
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**DO NOT WRITE IN THIS SPACE**

03222006 No Chg-LLC CR2E083 (11/05)

4. FEI Number  
20-0331120

5. Certificate of Status Desired ☐ **\$5.00** Additional Fee Required

Applied For
Not Applicable

6. Name and Address of Current Registered Agent

SERVELLO, GREGORY J  
261 SPIRNGVIEW COMMERCE DR.  
DEBARY, FL 32713

**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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

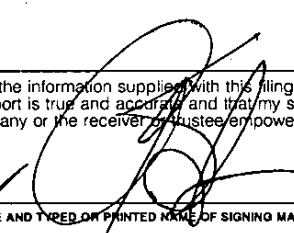
**Filing Fee is \$50.00  
Due by May 1, 2006**

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SERVELLO, GREGORY J 261 SPIRNGVIEW COMMERCE DR. DEBARY, FL 32713
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IN THIS SPACE**

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 609, Florida Statutes.

**SIGNATURE**  **4/5/06** **386-753-1100**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #