## 2006 LIMITED LIABILITY COMPANY.... ANNUAL REPORT (AR)

## **Secretary of State** DOCUMENT # L03000038188 1. Entity Name 02-17-2006 90019 029 \*\*\*\*50.00 GBP INVESTMENTS, LLC Principal Place of Business 824 PHEASANT RUN COURT WEST 824 PHEASANT RUN COURT WEST PORT ORANGE FL 32127 PORT ORANGE FL 32127 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E083 (10/05) City & State City & State 4. FEI Number Applied For 20-0298587 Not Applicable Zip Country Zip Country \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent GALBREATH, BRENDAN Street Address (P.O. Box Number is Not Acceptable) 824 PHEASANT RUN COURT WEST PORT ORANGE FL 32127 Zip Code 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 egistered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$50.00 Make Check Payable to Florida Department of State Due By May 1, 2006 MANAGING MEMBERS/MANAGERS 9. ADDITIONS/CHANGES 10. TITLE TITLE **MGRM** ☐ Delete ☐ Change ☐ Addition NAME GALBREATH, BRENDAN NAME STREET ADDRESS 824 PHEASANT RUN CT W STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP PORT ORANGE FL 32127 ☐ Delete TITLE ☐ Change ☐ Addition NAME GAFFKA, BRUCE & ANN NAME STREET ADDRESS 5763 STEWART AVE STREET ADDRESS CITY-ST-ZIP PORT ORANGE FL 32127 CITY-ST-ZIP TITLE PRIN \_\_\_ ☐ Defete TITLE\_ Change Addition NAME GAFFKA, ERIC NAME STREET ADDRESS STREET ADDRESS 460 PHEASANT RUN CT CITY-ST-ZIP CITY-ST-ZIP PORT ORANGE FL 32127 TITLE PRIN ☐ Delete TITLE ☐ Change ☐ Addition NAME PAYTAS, JAMES NAME STREET ADDRESS 80 HIGH POINT DR STREET ADDRESS CITY-ST-7IP PORT ORANGE FL 32127 CITY-ST-ZIP PRIN TITLE ☐ Defete TITLE ☐ Change ☐ Addition BARKER, RICH & DIANE NAME NAME 5967 BAGGSFORD RD STREET ADDRESS STREET ADDRESS PORT ORANGE FL 32127 CITY - ST - ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Addition GOLDBREATH INVESTMENTS LLC NAME GALBREATH INVESTMENTS LLC NAME 824 PHEASANT RUN CT W STREET ADDRESS STREET ADDRESS CITY - ST- ZIP PORT ORANGE FL 32127 CITY-ST-ZIP

I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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.

MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

**SIGNATURE** 

FILED

Feb 17, 2006 8:00 am

Davlime Phone #