2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000042461

Entity Name: GT FINANCIAL, LLC

FILED May 14, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

9025 NORTH MOBLEY RD. ODESSA, FL 33556

Current Mailing Address: New Mailing Address:

9025 NORTH MOBLEY RD. ODESSA, FL 33556

FEI Number: 20-0368346 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:

CASTELLANO, NELSON T 101 E. KENNEDY BLVD., ST.E 2700 TAMPA, FL 33602

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:

Date

ADDITIONS/CHANGES:

Electronic Signature of Registered Agent

MANAGING MEMBERS/MANAGERS:

Title: () Delete

(X) Change () Addition FERRANTE, THOMAS B FERRANTE, THOMAS B Name: Name: Address: 9025 NORTH MOBLEY RD. Address: 9550 W. GULF BLVD

City-St-Zip: ODESSA, FL 33556 US City-St-Zip: TREASURE ISLAND, FL 33706 US

(X) Change () Addition Title: MGRM () Delete Title: MGRM Name: FERRANTE, GAIL Name: FERRANTE, GAIL

Address: 9025 NORTH MOBLEY RD Address: 9550 W. GULF BLVD.

City-St-Zip: ODESSA, FL 33556 UA City-St-Zip: TREASURE ISLAND, FL 33706 UA

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: THOMAS B. FERRANTE 05/14/2007