

**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jan 07, 2005 08:00 AM
Secretary of State

DOCUMENT # L03000054394

1. Entity Name
GLS EQUITY HOLDINGS, LLC



Principal Place of Business
**3550 W. WATERS AVENUE
TAMPA, FL 33614**

Mailing Address
**3550 W. WATERS AVENUE
TAMPA, FL 33614**

DO NOT WRITE IN THIS SPACE



01042005No Chg-LLC

CR2E083 (10/03)

4. FEI Number
20-0497936

Applied For
☐ Not Applicable

5. Certificate of Status Desired



\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**CASSERLY, LINDA
3550 W. WATERS AVENUE
TAMPA, FL 33614**

**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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$50.00
Due by May 1, 2005**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**MGRM
GIBSON, MICHAEL W
3550 W. WATERS AVENUE
TAMPA, FL 33614**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**MGRM
SHAH, SUNIL A
3550 W. WATERS AVENUE
TAMPA, FL 33614**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**MGRM
LAWTON, ERIC B
3550 W. WATERS AVENUE
TAMPA, FL 33614**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

U00000174322
01/10/05-80004-015 55.00

**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

ERIC B. LAWTON

Date

Daytime Phone *

1-4-05 813-375-3361