2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 22, 2009
Secretary of State

DOCUMENT# L04000000767

Entity Name: GNO INVESTORS, LLC

Current Principal Place of Business:

4307 SHADOW WOOD LANE, SW
WINTER HAVEN, FL 33880

New Principal Place of Business:

Current Mailing Address:

4307 SHADOW WOOD LANE, SW
WINTER HAVEN, FL 33880

New Mailing Address:

FEI Number: 20-0591072 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DELOACH, FRED RA
4307 SHADOW WOOD LANE S.W.
WINTER HAVEN, FL 33880 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MANAGERS:

Title:	MGRM	( ) Delete
Name:	DELOACH, FRED	
Address:	4307 SHADOW WOOD LANE, SW	
City-St-Zip:	WINTER HAVEN, FL 33880	
Title:	MGRM	( ) Delete
Name:	CANTRALL, MATTHEW	
Address:	5319 SANDRA WAY	
City-St-Zip:	LAKELAND, FL 33813	
Title:	MGRM	( ) Delete
Name:	HARWELL, DOUGLASS K JR.	
Address:	3202 SILVERFOX PATH	
City-St-Zip:	LAKELAND, FL 33810	
Title:	MGRM	( ) Delete
Name:	CROWDER, ROB	
Address:	5509 LAPOINT DRIVE	
City-St-Zip:	LAKELAND, FL 33809	
Title:	MGRM	( ) Delete
Name:	TUBB, JOHN	
Address:	515 TIFFANY TERRACE	
City-St-Zip:	LAKELAND, FL 33813	
Title:	MGRM	( ) Delete
Name:	MORT, GEORGE	
Address:	2249 EASTMEADOWS COURT	
City-St-Zip:	LAKELAND, FL 33813	

ADDITIONS/CHANGES:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

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: FRED DELOACH MGRM 01/22/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date