

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

FILED
Apr 03, 2006 08:00 AM
Secretary of State

DOCUMENT # L04000041996	
1. Entity Name GOLDEN GECKO INVESTMENTS, LLC	

Principal Place of Business 6203 MARBELLA BLVD APOLLO BEACH FL 33572 US	Mailing Address 6203 MARBELLA BLVD APOLLO BEACH FL 33572 US
---	---



2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

1st MOORE CR2E083 (10/05)

4. FEI Number 22-3901637 ☐ **Applied For**
☐ **Not Applicable**

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

COKER, GREGORY F
6203 MARBELLA BLVD
APOLLO BEACH FL 33572

Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** **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 registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reconstituting) **DATE** _____

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Florida Department of State
Due By May 1, 2006

9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM COKER, GREGORY F 6203 MARBELLA BLVD APOLLO BEACH FL 33572 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM COKER, DIANA L 6203 MARBELLA BLVD APOLLO BEACH FL 33572 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM GERVASI, FRANK 6203 MARBELLA BLVD APOLLO BEACH FL 33572 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM GERVASI, URSULA 6203 MARBELLA BLVD APOLLO BEACH FL 33572 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition

U000000490691
04/18/06-80065-022 50.00

11. 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.

SIGNATURE: Diana Coker **3/31/06** **8136451485**