2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L04000058280

1. Entity Name
GBMC FINANCIAL, LLC

Principal Place of Business	Mailing Address
185 GRAND BLVD., STE. 100 SANDESTIN, FL 32550	185 GRAND BLVD., STE. 100 SANDESTIN, FL 32550

DO NOT WRITE IN THIS SPACE

02072008 No Chg-LLC   CR2E083 (12/07)

4. FEI Number	Applied For
20-2129149	Not Applicable

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

6. Name and Address of Current Registered Agent

HOWARD, JAMES K
185 GRAND BLVD., STE. 100
SANDESTIN, FL 32550

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

FILE NOW!!! FEE IS $138.75
After May 1, 2008 Fee will be $538.75

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	HOWARD, JAMES K
STREET ADDRESS	185 GRAND BLVD., STE. 100
CITY-ST-ZIP	SANDESTIN, FL 32550

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04/03/08-80071-010 138.75

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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 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: _____ Keith Howard 3-5-08 850-837-1886

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE   Date   Daytime Phone #