2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Feb 19, 2008 08:00 AM Secretary of State

DOCUMENT	*# L04000058303
A A.	

Entity Name

GBRI MANAGER, 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

02072008No Chg-LLC

CR2E083 (12/07)

4. FEI Number 20-2129609

Applied For 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

SIGNATURE:

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 NAME STREET ADDRESS CITY - ST - ZIP	MGR HOWARD, JAMES K 185 GRAND BLVD., STE. 100 SANDESTIN, FL 32550		U00000832819 02/27/08-80075-008 138.75	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS CITY - ST - ZIP	,	DO	NOT WRITE	
TITLE NAME STREET ADDRESS C(TY-SI-ZIP		IN	THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS CITY-SI-ZIP			-	
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				

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