## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L04000065811

City-St-Zip: GULF BREEZE, FL 32561 US

Entity Name: GINED, L.L.C.

FILED Feb 01, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:	
300 BEAR GULF BRE	DRIVE EEZE, FL 32561	US		
Current Mailing Address:			New Mailing Address:	
300 BEAR GULF BRE	DRIVE EEZE, FL 32561	US		
FEI Number	: 20-1600428	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )
Name and Address of Current Registered Agent:			Name and Address of New Registered Agent:	
EDDY, JAI 300 BEAR GULF BRE		US		
	named entity sul e of Florida.	omits this statement for the p	ourpose of changing its registere	ed office or registered agent, or both
SIGNATUI	RE:			
	Electronic	Signature of Registered Age	ent	Date
MANAGING MEMBERS/MANAGERS:			ADDITIONS/CHANGES:	
Title: Name: Address: City-St-Zip:	MGR () DO EDDY, EDWIN A 300 BEAR DRIVE GULF BREEZE, F		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition
Title: Name: Address: City-St-Zip:	MGR () DO EDDY, JANET L 300 BEAR DRIVE GULF BREEZE, F		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition
Title: Name: Address: City-St-Zip:	MGR () DO GINCAUSKAS, RC 527 DEER POINT GULF BREEZE, F	DLAND J DRIVE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition
Title: Name: Address:	MGR () Do GINCAUSKAS, SH 527 DEER POINT	IARON M	Title: Name: Address:	( ) Change ( ) Addition

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.

City-St-Zip:

SIGNATURE: JANET L. EDDY MGR 02/01/2009