

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000086321

Entity Name: GTS, LLC

FILED
Apr 17, 2008
Secretary of State

Current Principal Place of Business:

3000 UNIVERSAL STUDIOS PLAZA
BUILDING 17
ORLANDO, FL 32819 US

New Principal Place of Business:

Current Mailing Address:

3000 UNIVERSAL STUDIOS PLAZA
BUILDING 17
ORLANDO, FL 32819 US

New Mailing Address:

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCDONALD, GREGORY J
3000 UNIVERSAL STUDIOS PLAZA
BUILDING 17
ORLANDO, FL 32819 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: MGR () Delete
Name: MCDONALD, GREGORY J
Address: 3000 UNIVERSAL STUDIOS PLAZA, BLDG. 17
City-St-Zip: ORLANDO, FL 32819 US

Title: MGR () Delete
Name: MCDONALD, THOMAS A
Address: 3000 UNIVERSAL STUDIOS PLAZA, BLDG 17
City-St-Zip: ORLANDO, FL 32819

Title: MGR () Delete
Name: LABELLE, SUZANNE M
Address: 3000 UNIVERSAL STUDIOS PLAZA, BLDG 17
City-St-Zip: ORLANDO, FL 32819

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:

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: GREGORY J MCDONALD

MGR

04/17/2008

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