2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jul 03, 2006
Secretary of State

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Entity Name: GCI, LLC

Current Principal Place of Business:

2290 NORTH RONALD REGAN BLVD., SUITE 100
LONGWOOD, FL 32750

New Principal Place of Business:

2290 NORTH RONALD REGAN BLVD.
SUITE 100
LONGWOOD, FL 32750

Current Mailing Address:

2290 NORTH RONALD REGAN BLVD., SUITE 100
LONGWOOD, FL 32750

New Mailing Address:

2290 NORTH RONALD REGAN BLVD.
SUITE 100
LONGWOOD, FL 32750

FEI Number: 06-1742517 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

AMANING, KWADWO OWUSU
2290 NORTH RONALD REGAN BLVD., SUITE 100
LONGWOOD, FL 32750 US

Name and Address of New Registered Agent:

AMANING, KWADWO OWUSU
2290 NORTH RONALD REGAN BLVD.
SUITE 100
LONGWOOD, FL 32750 US

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: KWADWO OWUSU AMANING 07/03/2006
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: AMANING, KWADWO OWUSU
Address: 2290 NORTH RONALD REGAN BLVD., SUITE 100
City-St-Zip: LONGWOOD, FL 32750

Title: MGR ( ) Delete
Name: SAYED, SAYED MOURAD
Address: 2290 NORTH RONALD REGAN BLVD., SUITE 100
City-St-Zip: LONGWOOD, FL 32750

ADDITIONS/CHANGES:

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 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: KWADWO OWUSU AMANING PRES 07/03/2006
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date