

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000018876

Entity Name: GALEXAN LLC

FILED  
Mar 13, 2009  
Secretary of State

## Current Principal Place of Business:

1025 VETERANS MEMORIAL HWY SE STE 310 # 34  
9  
MABLETON, GA 30126 US

## Current Mailing Address:

5461 TRUMPET VINE TRL SE  
MABLETON, GA 30126 US

## New Principal Place of Business:

1025 VETERANS MEMORIAL HWY SE  
STE 310 # 349  
MABLETON, GA 30126 US

## New Mailing Address:

FEI Number: 20-2432807

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BUSINESS FILINGS INCORPORATED  
1203 GOVERNORS SQUARE BLVD  
SUITE 101  
TALLAHASSEE, FL 323012960 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: MGRM ( ) Delete  
Name: COOK, GREGORY  
Address: 5461 TRUMPET VINE TRL SE  
City-St-Zip: MABLETON, GA 30126 8

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## 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:

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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 A COOK

MR

03/13/2009

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