

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000040472

Entity Name: GAZPED, LLC

FILED
May 07, 2008
Secretary of State

Current Principal Place of Business:

41, CHAILETT ROAD
UNIT 7 & 8
ROTONDA, FL 33947 US

New Principal Place of Business:

Current Mailing Address:

210 ROTONDA BLVD WEST
ROTONDA WEST, FL 33947 US

New Mailing Address:

210 ROTONDA BLVD EAST
ROTONDA WEST, FL 33947 US

FEI Number: 20-2744498 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
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:

BAKER, PETER W
210 ROTONDA BLVD., EAST
ROTONDA WEST, FL 33947 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: BEEVOR, GARY
Address: 9564 APPLIN CIR
City-St-Zip: PORT CHARLOTTE, FL 33981 US

Title: MGRM () Delete
Name: BAKER, PETER
Address: 210 ROTONDA BLVD., EAST
City-St-Zip: ROTONDA WEST, FL 33947 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: ERIKSSON, MARGARETA A
Address: 210 ROTONDA BLVD EAST
City-St-Zip: ROTONDA WEST, FL 33947

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: PETER BAKER

MGR

05/07/2008

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