2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L05000100442

1. Entity Name
GPT PROPERTIES, LLC

Principal Place of Business	Mailing Address
15585 NORTHEAST JACKSONVILLE ROAD CITRA, FL 32113	21601 SW 154 AVE MIAMI, FL 33170

04242007 No Chg-LLC   CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 20-4310552	Applied For
	Not Applicable

5. Certificate of Status Desired ☐   **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

DODD, TIM
15585 NORTHEAST JACKSONVILLE ROAD
CITRA, FL 32113

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable.   (NOTE: Registered Agent signature required when reinstating)   DATE

Filing Fee is $50.00
Due by May 1, 2007

9.	MANAGING MEMBERS/MANAGERS	
TITLE	MGRM	
NAME	DODD, TIM	
STREET ADDRESS	15585 NORTHEAST JACKSONVILLE ROAD	
CITY-ST-ZIP	CITRA, FL 32113	
TITLE		U000000745971
NAME		05/16/07-80050-014 50.00
STREET ADDRESS		
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CITY-ST-ZIP		

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: _____   4/26/07

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE   Date   Daytime Phone #