

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000102433

Entity Name: GFYS, LLC

**FILED**  
**Jan 05, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

734 ABBY MIST DRIVE  
ST. JOHNS, FL 32259

**New Principal Place of Business:**

**Current Mailing Address:**

734 ABBY MIST DRIVE  
ST. JOHNS, FL 32259

**New Mailing Address:**

FEI Number: 02-0754275

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SHEE, CHRISTOPHER  
734 ABBY MIST DRIVE  
ST. JOHNS, FL 32259 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  
Name: SHEE, CHRISTOPHER  
Address: 734 ABBY MIST DRIVE  
City-St-Zip: ST. JOHNS, FL 32259

Title: MGRM  
Name: GINDER, DENNIS  
Address: 765 OPOSSUM LANE  
City-St-Zip: JACKSONVILLE, FL 32259

Title: MGRM  
Name: SADOWSKI, TERRY  
Address: 2900 STATE ROAD 13 N  
City-St-Zip: JACKSONVILLE, FL 32259

I hereby 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: CHRIS SHEE

MGRM

01/05/2011

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