2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000003828

Entity Name: GBG, LLC

City-St-Zip:

FILED Jan 18, 2007 Secretary of State

Current Principal Place of Business:		New Princi	New Principal Place of Business:	
-	E BOULEVARD, SUITE 1500			
Current Mailing Address:		New Mailing Address:		
1301 RIVERPLAC JACKSONVILLE,	E BOULEVARD, SUITE 1500 FL 32207			
FEI Number:	FEI Number Applied For (X)	FEI Number Not Applie	cable () Certificate of Status Desired ()	
Name and Addre	ss of Current Registered Agent:	Name and	Address of New Registered Agent:	
WODRICH, MICH 1301 RIVERPLAC JACKSONVILLE,	E BOULEVARD, SUITE 1500			
The above named in the State of Flor		purpose of changing its	s registered office or registered agent, or both	
SIGNATURE:				
E	Electronic Signature of Registered A	gent	Date	
MANAGING MEMBERS/MANAGERS:		ADDITIONS/C	ADDITIONS/CHANGES:	
Title: Name: Address: City-St-Zip:	() Delete	Title: Name: Address: City-St-Zip:	M () Change (X) Addition WURN, LONNIE 6014 SAN JOSE BOULEVARD JACKSONVILLE, FL 32217	
Title: Name: Address: City-St-Zip:	() Delete	Title: Name: Address: City-St-Zip:	M () Change (X) Addition WURN, EMILY 6014 SAN JOSE BOULEVARD JACKSONVILLE, FL 32217	
Title: Name: Address: City-St-Zip:	() Delete	Title: Name: Address: City-St-Zip:	M () Change (X) Addition WURN, LAWRENCE J RR2, BOX 2089 MELROSE, FL 32666	
Title: Name: Address: City-St-Zip:	() Delete	Title: Name: Address: City-St-Zip:	M () Change (X) Addition WURN, JACQUELINE 82 ALPINE WAY BOULDER, CO 80304	
Title: Name: Address:	() Delete	Title: Name: Address:	M () Change (X) Addition SACK, LORETTA J 15 ENCANTO AVENUES	

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.

City-St-Zip: SAN FRANCISCO, CA 94115

SIGNATURE: LONNIE WURN M 01/18/2007