2008 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

FILED May 01, 2008 08:00 AN Secretary of State **DOCUMENT # L06000004931** GTRM INVESTMENTS, L.L.C. Principal Place of Business Mailing Address **2614 GREEN CROSSING DRIVE** 2614 GREEN CROSSING DRIVE TALLAHASSEE, FL 32309 US TALLAHASSEE, FL 32309 US 04252008 No Chg-LLC CR2E083 (12/07) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3161987 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent MCSWAIN, THOMAS R DO NOT WRITE 2614 GREEN CROSSING DRIVE TALLAHASSEE, FL 32309 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, typed or printed name of registered agent and little if applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75 U00000936452 05/27/08-80011-010 138.75 MANAGING MEMBERS/MANAGERS 9. MGR TITLE MCMORROW, GARY NAME STREET ADDRESS 604 W. JAMES LEE BOULEVARD CITY-ST-ZIP CRESTVIEW, FL 32536 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

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 t 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.

STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY+ST-ZIP

TEO NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE