2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

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FILED
Jun 16, 2008 8:00 am
Secretary of State
05-14-2008 90080 022 ***138.75

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1. Entity Name
GAS STATIONS, USA PLUS LLC

30009366

Principal Place of Business	Mailing Address
1301 BEVILLE ROAD 7 DAYTONA BEACH, FL 32119	1301 BEVILLE ROAD 7 DAYTONA BEACH, FL 32119

04112008 Chg-LLC CR2E083 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
1898 S Clyde Morris Blvd	1898 S Clyde Morris Blvd
Suite, Apt. #, etc. Suite 500	Suite, Apt. #, etc. Suite 500
City & State Daytona Beach, FL	City & State Daytona Beach, FL
Zip 32119 / Country Volusia	Zip 32119 / Country

4. FEI Number [redacted] 56-2578395 ☐ Applied For ☐ Not Applicable

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

8. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
GAS STATIONS, USA INC 1301 BEVILLE ROAD 7 DAYTONA BEACH, FL 32119	Name Street Address (P.O. Box Number is Not Acceptable) 1898 S Clyde Morris Blvd Suite 500 City Daytona Beach **FL** Zip Code 32119

6. 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: Marilyn Amendolagine 4-20-08
Signature, typed or printed name of registered agent and title 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

Make check payable to Florida Department of State

9. MANAGING MEMBERS / MANAGERS			10. ADDITIONS / CHANGES		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGRM AMENDOLAGINE, MICHAEL A 1301 BEVILLE ROAD UNIT 7 DAYTONA BEACH, FL 32119	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGRM Amendolagine, Michael 1898 S Clyde Morris Blvd Suite 500 Daytona Beach, FL 32119	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGRM AMENDOLAGINE, MARILYN 1301 BEVILLE ROAD UNIT 7 DAYTONA BEACH, FL 32119	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGRM Amendolagine, Marilyn 1898 S Clyde Morris Blvd Suite 500 Daytona Beach, FL 32119	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGRM BARTHOLOMEW, DALE W 311-B SOUTH WOODLAND BLVD DELAND, FL 32721	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGRM BALDONADO, RICHARD D 311-B SOUTH WOODLAND BLVD DELAND, FL 32721	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

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: Marilyn Amendolagine 4-20-08 386-322-0673
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #