2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 24, 2007
Secretary of State

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Entity Name: GSN BISCAYNE HOLDINGS, LLC

Current Principal Place of Business:

130 CAMPBELL ROAD
FARHILLS, NY 07931

New Principal Place of Business:

455 GRAND BAY DRIVE
ROOM 802
KEY BISCAYNE, FL 33149 US

Current Mailing Address:

130 CAMPBELL ROAD
FARHILLS, NY 07931

New Mailing Address:

2 JENKS COURT
MORRISTOWN, NJ 07960 US

FEI Number: 20-4509662 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CORPORATION COMPANY OF MIAMI
201 S. BISCAYNE BLVD.
SUITE 1600 (LAD)
MIAMI, FL 33131 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: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGRM ( ) Change (X) Addition
Name: GREEN, NENA L
Address: 2 JENKS COURT
City-St-Zip: MORRISTOWN, NJ 07960 US

Title: MGRM ( ) Change (X) Addition
Name: LEITMAN, GAIL
Address: 9 VISTA COURT
City-St-Zip: PLEASANTVILLE, NY 10570 US

Title: MGRM ( ) Change (X) Addition
Name: LEVINE, SUZANNE
Address: 130 CAMPBELL ROAD
City-St-Zip: FAR HILLS, NJ 07931

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.

SIGNATURE: NENA L. GREEN MGRM 03/24/2007

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