

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000079003

FILED  
Apr 11, 2008  
Secretary of State

Entity Name: GULF COAST PRO TECH, LLC

**Current Principal Place of Business:**

7012 ALLVIEW DRIVE  
TAMPA, FL 33637

**New Principal Place of Business:**

**Current Mailing Address:**

7012 ALLVIEW DRIVE  
TAMPA, FL 33637

**New Mailing Address:**

FEI Number: 20-5350724

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

NUMBERCRUNCHERZ CONSULTING GROUP  
11444 CYPRESS RESERVE DR  
TAMPA, FL 33626 US

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

SKAGGS, RYAN W MR  
7012 ALLVIEW DR.  
TAMPA, FL 33637 US

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: RYAN W SKAGGS

04/11/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: SKAGGS, RYAN W  
Address: 7012 ALLVIEW DRIVE  
City-St-Zip: TAMPA, FL 33637

Title: MGRM ( ) Delete  
Name: GIRALDI, IAN O  
Address: 5224 FRANKLIN WOODLAND DRIVE  
City-St-Zip: PLANT CITY, FL 33565

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: RYAN W SKAGGS

MNGR

04/11/2008

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