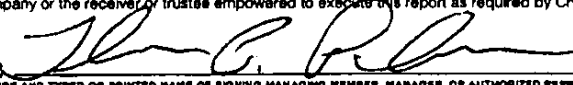


2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

9/13/2007-90018-001-\$25.00-\$25.00 *
9/13/2007-90018-002-\$25.00-\$25.00

DOCUMENT # L06000081888 1. Entity Name GPM OF PENSACOLA, LLC						FILED SECRETARY OF STATE DIVISION OF CORPORATIONS 07 SEP 26 PM 12:36 30012852 	
Principal Place of Business 226 S. PALAFOX STREET 101-A PENSACOLA, FL 32502				Mailing Address 226 S. PALAFOX STREET 101-A PENSACOLA, FL 32502			
2. Principal Place of Business - No P.O. Box # 1101 N. 9th Avenue		3. Mailing Address 1101 N. 9th Avenue		Suite, Apt. #, etc. 		Suite, Apt. #, etc. 	
City & State Pensacola Florida		City & State Pensacola, Florida		4. FEI Number 20-5408449		Applied For ☐ Not Applicable	
Zip 32501		Country USA		Zip 32501		Country USA	
5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required				6. Name and Address of Current Registered Agent BEGGS & LANE, RLLP WILLIAM H. MITCHEM 501 COMMENDENCIA STREET PENSACOLA, FL, FL 32502			
7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code				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 _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)				DATE _____			
Filing Fee is \$50.00 Due by September 14, 2007				Make check payable to Florida Department of State			
9. MANAGING MEMBERS/MANAGERS				10. ADDITIONS/CHANGES			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM GRANGER, SONNY 226 S. PALAFOX STREET, SUITE 101-A PENSACOLA, FL 32502			☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM PARKER, TOM 226 S. PALAFOX STREET, SUITE 101-A PENSACOLA, FL 32502			☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM MERRILL, COLLIER 226 S. PALAFOX STREET, SUITE 101-A PENSACOLA, FL 32502			☒ 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	
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: 				9-11-07 (850) 434-7500			
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE				Date Daytime Phone #			