2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L06000093417

GULF COAST VENDING SERVICE COMPANY, LLC



FILED Apr 28, 2008 08:00 AN Secretary of State

Principal Place of Business

4377 COMMERCIAL WAY #101

SPRING HILL, FL 34606

Mailing Address

4377 COMMERCIAL WAY

DO NOT WRITE IN THIS SPACE

SPRING HILL, FL 34606



01072008 No Chg-LLC

CR2E083 (12/07)

4.	FEI Number			Applied For
	20-5597254	_		Not Applicable
5.	Certificate of Status Desired		\$5.0	Additional

6. Name and Address of Current Registered Agent

CIANNAMEA, JOSEPH F 4377 COMMERCIAL WAY #101 SPRING HILL, FL 34606

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The above named entity submits this statement for the purpose of cha the obligations of registered agent.	inging its registered office or registered agent, or both, i	n the State of Piorida. I am familiar with, and acce	וכ	
SIGNATURE. Signature typed or printed name of registered agent and title it applicable.	(NOTE: Registered Agent signature required when reinstating)	DATE		
FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75	#00000930020			

MANAGING MEMBERS/MANAGERS 9. MGR TITLE CIANNAMEA, JOSEPH F NAME STREET ADDRESS 4377 COMMERCIAL WAY #101 CITY-ST-ZIP SPRING HILL, FL 34606 MGRM CIANNAMEA, LAURIE J NAME 4377 COMMERCIAL WAY #101 STREET ADDRESS CITY-ST-ZIP SPRING HILL, FL 34606 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAMÉ STREET ADDRESS

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11. I hereby certify that the information supplied with this filling 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.

CITY-ST-ZIP