

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000009104

FILED
Jul 04, 2008
Secretary of State

Entity Name: GABRIEL PUBLISHING COMPANY, LLC

Current Principal Place of Business:

637 LAKEWORTH CIRCLE
LAKE MARY, FL 32746

New Principal Place of Business:

Current Mailing Address:

P O BOX 181974
CASSELBERRY, FL 32718

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GABRIEL, MARK A DR
637 LAKEWORTH CIRCLE
LAKE MARY, FL 32746 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: MGR () Delete
Name: GABRIEL, MARK A DR
Address: 637 LAKEWORTH CIRCLE
City-St-Zip: LAKE MARY, FL 32746

Title: MGRM () Delete
Name: POULALION, DEBORAH
Address: 1367 CORJESU COURT
City-St-Zip: LONGWOOD, FL 32750

Title: MGRM (X) Delete
Name: BURKUM, PATRICIA A
Address: 321 KENTUCKY BLUE CIRCLE
City-St-Zip: APOPKA, FL 32712

ADDITIONS/CHANGES:

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

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: MARK A GABRIEL

DR

07/04/2008

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