

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000031814

Entity Name: GSA ENTERPRISES LLC

FILED
Sep 03, 2008
Secretary of State

Current Principal Place of Business:

12330 HOUSTON AVE
BIG TALBOT ISLAND
JACKSONVILLE, FL 32226

New Principal Place of Business:

Current Mailing Address:

12330 HOUSTON AVE
BIG TALBOT ISLAND
JACKSONVILLE, FL 32226

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired (X)
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

ARMELLINO, GARY S MR
12330 HOUSTON AVE
BIG TALBOT ISLAND
JACKSONVILLE, FL 32226 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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: PRES () Delete
Name: ARMELLINO, GARY S MR
Address: 12330 HOUSTON AVE
City-St-Zip: JACKSONVILLE, FL 32226

Title: TRES () Delete
Name: ARMELLINO, JEAN I MRS
Address: 12330 HOUSTON AVE
City-St-Zip: JACKSONVILLE, FL 32226

Title: SEC () Delete
Name: ARMELLINO, JEAN I MRS
Address: 12330 HOUSTON AVE
City-St-Zip: JACKSONVILLE, FL 32226

Title: VP () Delete
Name: STERN, DEREK G MR
Address: 63 CHURCH LANE
City-St-Zip: PORTSMITH, RI 02871

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:

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: GARY ARMELLINO

PRES

09/03/2008

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