

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000049564

FILED  
Jan 09, 2009  
Secretary of State

Entity Name: GEE VEE PARTNERS, LLC

**Current Principal Place of Business:**

1215 E. HILLSBORO BLVD.  
DEERFIELD BEACH, FL 33441

**New Principal Place of Business:**

**Current Mailing Address:**

1215 E. HILLSBORO BLVD.  
DEERFIELD BEACH, FL 33441

**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:**

CAMPBELL, WILLIAM B III  
1215 E. HILLSBORO BLVD.  
DEERFIELD BEACH, FL FL                      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: MGRM                      ( ) Delete  
Name: CAMPBELL, WILLIAM B III  
Address: 1215 E. HILLSBORO BLVD  
City-St-Zip: DEERFIELD BEACH, FL 33441

Title: MGR                      ( ) Delete  
Name: CAMPBELL, BRUCE R  
Address: 1215 E. HILLSBORO BLVD  
City-St-Zip: DEERFIELD BEACH, FL 33441

Title: MGR                      ( ) Delete  
Name: TIGHT, ALVIN J III  
Address: 1215 E. HILLSBORO BLVD  
City-St-Zip: DEERFIELD BEACH, FL 33441

Title: MGR                      ( ) Delete  
Name: ELSTER, LARRY  
Address: 17150 GRAND BAY DRIVE  
City-St-Zip: BOCA RATON, FL 33496

Title: MGR                      ( ) Delete  
Name: ROSEMURGY FAMILY LLC,  
Address: 1215 E. HILLSBORO BLVD.  
City-St-Zip: DEERFIELD BEACH, FL 33441

**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:

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: WILLIAM B CAMPBELL                      MM                      01/09/2009

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