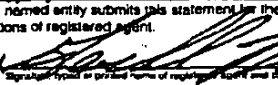
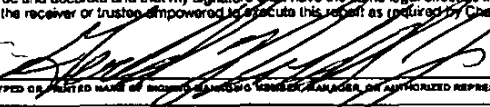


FILED
Mar 10, 2008 8:00 am
Secretary of State

01-10-2008 90021 024 ***138.75

2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT

DOCUMENT # L07000056465			
1. Entity Name G & I INVESTMENTS, LLC			
Principal Place of Business 2829 N MAIN STREET JACKSONVILLE, FL 32209		Mailing Address 2829 N MAIN STREET JACKSONVILLE, FL 32209	
2. Principal Place of Business - No P.O. Box # 2829 N Main St		3. Mailing Address Same	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State Daytona Beach		City & State	
Zip 32206		Country	
4. FEI Number 26-0256946		Applied For Not Applicable	
5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required			
6. Name and Address of Current Registered Agent ROMANELLO, DUANE C 1919 BLANDING BLVD JACKSONVILLE, FL 32210 MCFALL, GERALD A. JR 34322 DAYBREAK DRIVE CALLEHAN, FL 32011		7. Name and Address of New Registered Agent Name MCFALL, GERALD A. JR. Street Address (P.O. Box Number is Not Acceptable) 34322 DAYBREAK DRIVE City CALLEHAN FL Zip Code 32011	
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 X 		DATE 1/9/08	
FILE NOW! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75		Make check payable to Florida Department of State	
9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP MGRM OWNER MCFALL, GERALD A. JR. 2829 N MAIN STREET JACKSONVILLE, FL 32209		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	
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 808, Florida Statutes.			
SIGNATURE X 		DATE 3/4/08 9043549395	