## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L07000080043

Entity Name: GECKO, LLC

City-St-Zip:

SMYMA, GA 30080

FILED Apr 27, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 2737 HAMMOND COURT SMYMA, GA 30080 **Current Mailing Address: New Mailing Address:** 2737 HAMMOND COURT SMYMA, GA 30080 FEI Number: 39-2059929 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: PLATT, DAVID M 1648 PERIWINKLE WAY, SUITE B SANIBEL, FL 33957 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: ADDITIONS/CHANGES: MGR Title: () Change () Addition () Delete WARD, THOMAS P Name: Name: Address: 663 KENILWORTH AVENUE Address: GLEN ELLYN, IL 60137 City-St-Zip: City-St-Zip: Title: MGR ( ) Delete Title: MGR (X) Change ( ) Addition Name: BARBER, J. SHAWN Name: BARBER, LESLEY Address: 25 PARKSHORE POINT Address: 25 PARKSHORE POINT City-St-Zip: NEWNAN, GA 30263 City-St-Zip: NEWNAN, GA 30263 Title: MGR () Delete Title: () Change () Addition GONCHER, MARIANNE Name: Name: 2737 HAMMOND COURT Address: Address:

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.

City-St-Zip:

SIGNATURE: THOMAS P. WARD MGR 04/27/2009