

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000093573

FILED  
Apr 06, 2009  
Secretary of State

Entity Name: G.J.T., LLC

**Current Principal Place of Business:**

3603 THOMAS DRIVE  
PANAMA CITY BCH, FL 32408 US

**New Principal Place of Business:**

**Current Mailing Address:**

3603 THOMAS DRIVE  
PANAMA CITY BCH, FL 32408 US

**New Mailing Address:**

FEI Number: 26-0898862

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

MCGOWEN, JOHN  
3603 THOMAS DRIVE  
PANAMA CITY BCH, FL 32408 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: MCGOWEN, JOHN  
Address: 3603 THOMAS DRIVE  
City-St-Zip: PANAMA CITY BCH, FL 32408 US

Title: MGRM ( ) Delete  
Name: LAIRD, GEORGE  
Address: 1415 DEWITT ST  
City-St-Zip: PANAMA CITY, FL 32408 US

Title: MGRM ( ) Delete  
Name: FARRILL, JOEY  
Address: 2129 FOX RUN  
City-St-Zip: LYNN HAVEN, FL 32444 US

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**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: MGRM ( ) Change (X) Addition  
Name: PARTLOW, DONALD W JR  
Address: 5914 E HWY 22  
City-St-Zip: PANAMA CITY, FL 32401 US

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: GEORGE LAIRD

MGRM

04/06/2009

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