

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000107992

FILED
Mar 09, 2009
Secretary of State

Entity Name: GCS IRONING SYSTEMS, LLC.

Current Principal Place of Business:

2710 DEL PRADO BLVD
#2 182
CAPE CORAL, FL 33904 US

New Principal Place of Business:

Current Mailing Address:

2710 DEL PRADO BLVD
#2 182
CAPE CORAL, FL 33904 US

New Mailing Address:

FEI Number: 26-1297793 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KRUPICK, PAUL
2710 DEL PRATO BLVD
#2
CAPE CORAL, FL 33904 US

Name and Address of New Registered Agent:

KRUPICK, PAUL
2710 DEL PRADO BLVD
#2 182
CAPE CORAL, FL 33904 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: _____ 03/09/2009
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: WELLS, DIANE
Address: 1518 SHELBY PARKWAY
City-St-Zip: CAPE CORAL, FL 33904 US

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRM () Delete
Name: WELLS, JAMES
Address: 1518 SHELBY PARKWAY
City-St-Zip: CAPE CORAL, FL 33904 US

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: DIANE WELLS MGRM 03/09/2009
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date