

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT (AR) - DUE BY MAY 1, 2008**

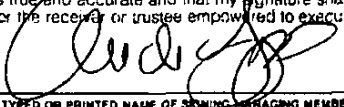
FILED
May 21, 2008 8:00 am
Secretary of State

04-23-2008 90119 037 ***138.75

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1st MOORE CR2E083 (10/07)

DOCUMENT # L07000117216					
1. Entity Name GCKA INVEST, LLC					
Principal Place of Business 1921 WALDEMERE STREET SUITE 306 SARASOTA FL 34239			Mailing Address 1921 WALDEMERE STREET SUITE 306 SARASOTA FL 34239		
2. Principal Place of Business - No P.O. Box #			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 261455469	
				Applied For Not Applicable	
5. Certificate of Status Desired ☐				\$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
SHEA, JOHN J 269 S. OSPREY AVE. SUITE 100 SARASOTA FL 34236			Name		
			Street Address (P.O. Box Number is Not Acceptable)		
			City FL Zip Code		
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 _____ DATE _____ Signature typed or printed name of reg. period agent and fee acceptor. (NOTE: Registered Agent signature required when transferring)					
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	MGRM	☐ Delete	TITLE		☐ Change ☐ Addition
NAME	LAZIN, ANDREW L		NAME		
STREET ADDRESS	1425 DIXIE LEE LANE		STREET ADDRESS		
CITY - ST - ZIP	SARASOTA FL 34231		CITY - ST - ZIP		
TITLE	MGRM	☐ Delete	TITLE		☐ Change ☐ Addition
NAME	PIPOVSKI, LAZO		NAME		
STREET ADDRESS	5656 ASHTON LAKE DRIVE		STREET ADDRESS		
CITY - ST - ZIP	SARASOTA FL 34231		CITY - ST - ZIP		
TITLE	MGRM	☐ Delete	TITLE		☐ Change ☐ Addition
NAME	IMPERIO, DENNIS		NAME		
STREET ADDRESS	6825 TALLMAST CIRCLE		STREET ADDRESS		
CITY - ST - ZIP	BRADENTON FL 34202		CITY - ST - ZIP		
TITLE	MGRM	☐ Delete	TITLE		☐ Change ☐ Addition
NAME	JENSEN, PETER		NAME		
STREET ADDRESS	8984 HUNTINGTON POINTE DRIVE		STREET ADDRESS		
CITY - ST - ZIP	SARASOTA FL 34238		CITY - ST - ZIP		
TITLE	MGRM	☒ Delete	TITLE		☐ Change ☐ Addition
NAME	CHO CHUNG HING, LORRAINE S		NAME		
STREET ADDRESS	832 PLACID LAKE DRIVE		STREET ADDRESS		
CITY - ST - ZIP	OSPREY FL 34229		CITY - ST - ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY - ST - ZIP			CITY - ST - ZIP		
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 608, Florida Statutes.					
SIGNATURE: 			9/10/08 941-917-8722		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE					