

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000002503

Entity Name: GT LIME, LLC

FILED  
Apr 28, 2009  
Secretary of State

**Current Principal Place of Business:**

201 MONROE AVE UNIT 7D  
MAITLAND, FL 327516606

**New Principal Place of Business:**

**Current Mailing Address:**

765 SUNSET RIDGE LANE  
LAWRENCEVILLE, GA 30045

**New Mailing Address:**

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

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

BANNISTER, MARK  
201 MONROE AVE UNIT 7D  
MAITLAND, FL 327516606 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: MGR ( ) Delete  
Name: BANNISTER, MARK  
Address: 201 MONROE AVE UNIT 7D  
City-St-Zip: MAITLAND, FL 327516606

Title: MGRM ( ) Delete  
Name: ASHBY, LAUREN  
Address: 57 SOUTHVIEW CRESCENT  
City-St-Zip: LONDON ONTARIO CANADA N6J3L6, OF

Title: MGRM ( ) Delete  
Name: FRASER, CAROL  
Address: 765 SUNSET RIDGE LANE  
City-St-Zip: LAWRENCVILLE, GA 30045

**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:

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: CAROL FRASER

MGRM

04/28/2009

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