

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000024769

Entity Name: 670 GC PKWY, LLC

**FILED**  
**Jan 10, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

105 WEST PLANT STREET, STE. 6  
WINTER GARDEN, FL 34787

**New Principal Place of Business:**

105 WEST PLANT STREET, STE. 7  
WINTER GARDEN, FL 34787

**Current Mailing Address:**

P.O. BOX 771583  
WINTER GARDEN, FL 34777

**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:**

SIKES, RONALD W ESQ.  
310 SOUTH DILLARD STREET, STE. 120  
WINTER GARDEN, FL 34787 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  
Name: LAWRENCE E. CAPPLEMAN JR. TRUST  
Address: 105 WEST PLANT STREET, STE. 7  
City-St-Zip: WINTER GARDEN, FL 34787

Title: MGR  
Name: KEATING, TIMOTHY M  
Address: 802 TIDENVILLE SCHOOL ROAD  
City-St-Zip: WINTER GARDEN, FL 34787

I hereby 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: LAWRENCE E. CAPPLEMAN, JR

MGR

01/10/2011

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