

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000033516

**FILED**  
**Apr 04, 2012**  
**Secretary of State**

**Entity Name:** G&P ASSOCIATION SERVICES LLC

**Current Principal Place of Business:**

2109 CARPATHIAN PLACE  
APOPKA, FL 32712

**New Principal Place of Business:**

445 DOUGLAS AVE  
SUITE #1105  
ALTAMONTE SPRINGS, FL 32714

**Current Mailing Address:**

2109 CARPATHIAN PLACE  
APOPKA, FL 32712

**New Mailing Address:**

445 DOUGLAS AVE  
SUITE #1105  
ALTAMONTE SPRINGS, FL 32714

**FEI Number:** 45-0877247

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PIRON, RAQUEL  
2109 CARPATHIAN PLACE  
APOPKA, FL 32712 US

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

PIRON, RAQUEL  
445 DOUGLAS AVE.  
SUITE #1105  
ALTAMONTE SPRINGS, FL 32714 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: GUY GABALDON, JR.

04/04/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: PIRON, RAQUEL  
Address: 2109 CARPATHIAN PLACE  
City-St-Zip: APOPKA, FL 32712

Title: MGR  
Name: GABALDON, GUY JR.  
Address: 1504 CROSSBEAM CIRCLE  
City-St-Zip: CASSELBERRY, FL 32707

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: GUY GABALDON, JR.

MGR

04/04/2012

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