2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L99000000126

1. Entity Name
GDN NO. 1, L.L.C.

Principal Place of Business	Mailing Address
102 SUNSET LANE SHALIMAR, FL 32579	P.O. BOX 343 SHALIMAR, FL 32579

DO NOT WRITE IN THIS SPACE

03182004 No Chg-LLC   CR2E083 (10/03)

4. FEI Number	Applied For
59-3567105	Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

NABORS, JAMES E
17 LONGWOOD DR.
SHALIMAR, FL 32579

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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_____

Signature, typed or printed name of registered agent and title if applicable.   (NOTE. Registered Agent signature required when reinstating)   DATE

Filing Fee is $50.00
Due by May 1, 2004

U000000105616
04/07/04--80032-021 50.00

9.	MANAGING MEMBERS/MANAGERS
TITLE	MGR
NAME	NABORS, JAMES E
STREET ADDRESS	17 LONGWOOD DRIVE
CITY-ST-ZIP	SHALIMAR, FL 32579
TITLE	MGRM
NAME	GILBERT, CONNIE
STREET ADDRESS	29 LONGWOOD DRIVE
CITY-ST-ZIP	SHALIMAR, FL 32579
TITLE	MGRM
NAME	DARNELL, SHARILYN
STREET ADDRESS	1 LONGWOOD DRIVE
CITY-ST-ZIP	SHALIMAR, FL 32579
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: 3/18/04

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE   Date   Daytime Phone #