2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M02000002722

Entity Name: GSC INVESTMENTS, LLC

FILED Feb 13, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

4852 N. OCEAN ST. MAYPORT, FL 32233

Current Mailing Address: New Mailing Address:

P.O. BOX 57 MAYPORT, FL 32267

FEI Number: 22-3875378 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

HAAS, KIMBERLY H
4852 N. OCEAN ST.
MAYPORT, FL 32233 US
HAAS, KIMBERLY
4852 N. OCEAN ST.
MAYPORT, FL 32233 US
MAYPORT, FL 32233 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: KIMBERLY HAAS 02/13/2005

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MEMBERS:

Title: P () Delete Name: MACCURRY, STEVEN

Address: PO BOX 306

City-St-Zip: CAROLINA BEACH, NC 28428

 Title:
 V
 () Delete

 Name:
 HAAS, MICHAEL

 Address:
 4852 N. OCEAN ST.

 City-St-Zip:
 MAYPORT, FL 32233

 Title:
 S
 () Delete

 Name:
 HAAS, KIMBERLY

 Address:
 4852 N OCEAN ST

 City-St-Zip:
 MAYPORT, FL 32233

Title: T () Delete
Name: MACCURRY, SHERILYN

Name: MACCURRY, SHERILYI Address: P.O. BOX 306

City-St-Zip: CAROLINA BEACH, NC 28428

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition

Name: MACCURRY, STEVEN

Address: PO BOX 306

City-St-Zip: CAROLINA BEACH, NC 28428

Title: MGRM (X) Change () Addition

 Name:
 HAAS, MICHAEL

 Address:
 4852 N. OCEAN ST.

 City-St-Zip:
 MAYPORT, FL 32233

Title: MGR (X) Change () Addition

 Name:
 HAAS, KIMBERLY

 Address:
 4852 N OCEAN ST

 City-St-Zip:
 MAYPORT, FL 32233

Name: MACCURRY, SHERILYN

Address: P.O. BOX 306

City-St-Zip: CAROLINA BEACH, NC 28428

I hereby certify that the information supplied with this filing does not qualify for the 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 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: MICHAEL HAAS MGRM 02/13/2005