

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M11000003925

**FILED**  
**Apr 27, 2012**  
**Secretary of State**

**Entity Name:** G C SERVICES OF FLORIDA I, LLC

**Current Principal Place of Business:**

6816 COUNTY HWY 183 N.  
DEFUNIAK SPRINGS, FL 32433

**New Principal Place of Business:**

**Current Mailing Address:**

6816 COUNTY HWY 183 N.  
DEFUNIAK SPRINGS, FL 32433

**New Mailing Address:**

**FEI Number:** 80-0739430

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GEOGHAGAN, JEFFERY  
6816 COUNTY HWY 183 N.  
DEFUNIAK SPRINGS, FL 32433 US

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

WILLIAMSON LAW FIRM, LLC  
1414 COUNTY HIGHWAY 283 SOUTH  
UNIT B  
SANTA ROSA BEACH, FL 32459 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: WILLIAMSON LAW FIRM, LLC

04/27/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: GEOGHAGAN, JEFFERY  
Address: 6816 COUNTY HWY 183 N.  
City-St-Zip: DEFUNIAK SPRINGS, FL 32433

Title: MGR  
Name: CORBIN, JOHN J  
Address: 4821 MOSLEY LANE N  
City-St-Zip: CRESTVIEW, FL 32539

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: JEFFREY GEOGHAGAN

MGRM

04/27/2012

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