


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2004 8:00 am
Secretary of State

05-03-2004 91022 002 ***150.00

DOCUMENT # 833525
 1. Entity Name
G-A-I CONSULTANTS, INC.



Principal Place of Business Mailing Address
618 EAST SOUTH STREET **570 BEATTY ROAD**
ORLANDO, FL 32801 **MONROEVILLE, PA 15146**

94081799



04202004 No Chg-P CR2EQ34 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number Applied For
25-1260999 NOT Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
DEJIDAS, GARY M
1436 CAMPBELL STREET
ORLANDO, FL 32806-7048

DO NOT WRITE IN THIS SPACE

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	DPC
NAME	DEJIDAS, GARY M
STREET ADDRESS	618 EAST SOUTH ST
CITY-ST-ZIP	ORLANDO, FL 32801
TITLE	DV
NAME	DODDS, LAWRENCE R
STREET ADDRESS	570 BEATTY RD
CITY-ST-ZIP	MONROEVILLE, PA 15146
TITLE	DV
NAME	SIEVERS, J M
STREET ADDRESS	618 EAST SOUTH ROAD
CITY-ST-ZIP	ORLANDO, FL 32801
TITLE	DV
NAME	MORROCCO, ANTHONY F
STREET ADDRESS	570 BEATTY ROAD
CITY-ST-ZIP	MONROEVILLE, PA 15146
TITLE	DV
NAME	LANDERS, DIANE B
STREET ADDRESS	570 BEATTY RD
CITY-ST-ZIP	MONROEVILLE, PA 15146
TITLE	V
NAME	GRAY, RICHARD E
STREET ADDRESS	570 BEATTY RD -
CITY-ST-ZIP	MONROEVILLE, PA 15146

DO NOT WRITE IN THIS SPACE

12. 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 or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Gary M. DeJidas* **Gary M. DeJidas** **4/26/04** **(407)423-8398**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Corporate Phone #