


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 03, 2006 08:00 AM
Secretary of State

DOCUMENT # F95000004923

1. Entity Name
AMERICAN GFM CORPORATION



Principal Place of Business
**1200 CAVALIER BLVD.
CHESAPEAKE, VA 23323**

Mailing Address
**1200 CAVALIER BLVD.
CHESAPEAKE, VA 23323**

DO NOT WRITE IN THIS SPACE



01312006 No Chg-P CR2E034 (11/05)

4. FEI Number
54-1059861

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324**

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

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P KRALOWETZ, ROBERT 1200 CAVALIER BLVD CHESAPEAKE, VA
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V MCCABE, RONALD L 1200 CAVALIER BLVD CHESAPEAKE, VA
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S MACKINLAY, EDGAR H 1200 CAVALIER BLVD CHESAPEAKE, VA
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KRALOWETZ, ROBERT 1200 CAVALIER BLVD CHESAPEAKE, VA
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VT HALL, JEFF R 1200 CAVALIER BLVD CHESAPEAKE, VA
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

1100000418577
02/14/06-80013-001 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: Jeff R Hall JEFF R. HALL/VP FINANCE 2/3/06 757-487-2442
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #