2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000129001

F-4:4 - N-OODO INO FILED Feb 07, 2008 Secretary of State

Entity Nar	ne: GCPC, INC	J.			
Current Principal Place of Business:			New Principal Place of Business:		
105 E 23RI PANAMA (OSTREET CITY, FL 32405				
Current Mailing Address:			New Mailing Address:		
105 E 23RI PANAMA (DISTREET DITY, FL 32405				
FEI Number:	20-5752574	FEI Number Applied For ()	FEI Number Not Appl	plicable () Certificate of Status Desired ()	
Name and	Address of C	ırrent Registered Agent:	Name and	d Address of New Registered Agent:	
	MICHAEL 23RD STREET DITY, FL 32405				
The above in the State		ubmits this statement for the	purpose of changing i	its registered office or registered agent, or both,	
SIGNATUR	RE:				
Election Can		c Signature of Registered Ag Trust Fund Contribution ().	ent	Date	
	S AND DIRECT	, ,	ADDITION	NS/CHANGES TO OFFICERS AND DIRECTOR:	
Title: Name: Address: City-St-Zip:		Delete IEL L LAND AVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	V () BARNES, MATT 1620 GEORGIA LYNN HAVEN, F		Title: Name: Address: City-St-Zip:	V (X) Change () Addition BARNES, MATT 2502 CAMRYN'S CROSSING PANAMA CITY, FL 32405	
Title: Name: Address: City-St-Zip:	V () BURNETTE, TON 1200 YATE AVE PANAMA CITY, F		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	S () BURNS, WANDA 1806 RHODE IS		Title: Name: Address:	S (X) Change () Addition BARNES, WANDA 1806 RHODE ISLAND AVE	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

City-St-Zip:

LYNN HAVEN, FL 32444

SIGNATURE: MICHAEL L. BARNES 02/07/2008 D

LYNN HAVEN, FL 32444

City-St-Zip: