2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P12824

GUERRA, JAY R

RAYTOWN, MD 64133

9201 E. 63RD STREET, STE. 100

Name:

Address:

City-St-Zip:

Entity Name: GIBBENS DRAKE & SCOTT INC

FILED Feb 09, 2006 Secretary of State

Littly Na	ille. Gibblin	DRAKE & SCOTTING.			
Current Principal Place of Business:			New Principal Place of Business:		
9201 E. 63 RAYTOW	BRD STREET, N, MO 64133	STE. 100 US			
Current Mailing Address:			New Mailing Address:		
9201 E. 63 RAYTOW	BRD STREET, N, MO 64133	STE. 100 US			
FEI Number	: 43-1303814	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	d Address of C	Current Registered Agent:	Name and Address of	Name and Address of New Registered Agent:	
2731 EXE SUITE 4	RVICES, INC. CUTIVE PARK , FL 33331 US				
	e named entity e of Florida.	submits this statement for the	purpose of changing its registered	d office or registered agent, or both,	
SIGNATU	RE:				
	Electror	nic Signature of Registered Ag	ent	Date	
Election Ca	mpaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	GIBBENS, THO	STREET, STE. 100	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DRAKE, ROBE	STREET, STE. 100	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	SCOTT, TIMOT	STREET, STE. 100	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title:	VP () Delete	Title:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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.

Name:

Address:

City-St-Zip:

SIGNATURE: ROBERT M. DRAKE MR. 02/09/2006