

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000076568

Entity Name: G2H2, INCORPORATED

FILED  
Jan 29, 2004  
Secretary of State

**Current Principal Place of Business:**

550 MARY ESTHER CUTOFF #18  
FORT WALTON BEACH, FL 32548

**New Principal Place of Business:**

**Current Mailing Address:**

550 MARY ESTHER CUTOFF #18  
FORT WALTON BEACH, FL 32548

**New Mailing Address:**

FEI Number: 59-3338573

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

GATES, CAROL J  
757 HIGHWAY 98 EAST #14  
DESTIN, FL 32541 US

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

GATES, CAROL J  
550 MARY ESTHER CUTOFF #18  
FORT WALTON BEACH, FL 32548 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: \_\_\_\_\_

Electronic Signature of Registered Agent

01/29/2004

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: GATES, WILLIAM H  
Address: 355 SAILFISH DR.  
City-St-Zip: DESTIN, FL

Title: VST ( ) Delete  
Name: GATES, CAROL J  
Address: 355 SAILFISH DR.  
City-St-Zip: DESTIN, FL

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PS (X) Change ( ) Addition  
Name: GATES, WILLIAM H  
Address: 355 SAILFISH DR.  
City-St-Zip: DESTIN, FL 32541

Title: VST (X) Change ( ) Addition  
Name: GATES, CAROL J  
Address: 355 SAILFISH DR.  
City-St-Zip: DESTIN, FL 32541

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

SIGNATURE: CAROL J GATES

Electronic Signature of Signing Officer or Director

VPT

01/29/2004

Date