2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 22, 2008
Secretary of State

DOCUMENT# P97000037108

Entity Name: G W P CONSTRUCTION, INC.

Current Principal Place of Business:

4125 NW 44TH AVE
OCALA, FL 34482 US

New Principal Place of Business:

4269 NW 44TH AVENUE
SUITE A
OCALA, FL 34482 US

Current Mailing Address:

P.O. BOX 190
ANTHONY, FL 32617 US

New Mailing Address:

4269 NW 44TH AVENUE
SUITE A
OCALA, FL 34482 US

FEI Number: 59-3443055 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

PAULEY, GARY W
4601 N.E. 112TH LANE
ANTHONY, FL 32617 US

Name and Address of New Registered Agent:

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 Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: V/D ( ) Delete
Name: PAULEY, WAYNE K
Address: 13033 NE 47TH AVE
City-St-Zip: ANTHONY, FL 32617

Title: V/D ( ) Delete
Name: RIGGS, CHERYL P
Address: 13013 NE 47TH CT
City-St-Zip: ANTHONY, FL 32617

Title: P/D ( ) Delete
Name: PAULEY, GARY W
Address: 4601 N.E. 112TH LANE
City-St-Zip: ANTHONY, FL 34421

Title: T/D ( ) Delete
Name: PAULEY, JUDY T
Address: 4601 NE 112 LN
City-St-Zip: ANTHONY, FL 34421

Title: SD ( ) Delete
Name: DAVIS, ROBERT E
Address: 11528 SW 89TH AVENUE
City-St-Zip: OCALA, FL 34481

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: T/D (X) Change ( ) Addition
Name: PAULEY, JUDY T
Address: 4601 N.E. 112TH LANE
City-St-Zip: ANTHONY, FL 34421

Title: S (X) Change ( ) Addition
Name: DAVIS, ROBERT E
Address: 11528 SW 89TH AVENUE
City-St-Zip: OCALA, FL 34481

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.

SIGNATURE: GARY W. PAULEY PRES 04/22/2008
Electronic Signature of Signing Officer or Director Date