

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000043057

Entity Name: GWN SECURITIES, INC.

FILED
Mar 29, 2007
Secretary of State

Current Principal Place of Business:

11440 JOG ROAD
SUITE 101
PALM BEACH GARDENS, FL 334183764

New Principal Place of Business:

Current Mailing Address:

11440 JOG ROAD
SUITE 101
PALM BEACH GARDENS, FL 334183764

New Mailing Address:

FEI Number: 65-0939556 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WALSH, MARY T
11440 JOG ROAD
SUITE 101
PALM BEACH GARDENS, FL 334183764 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: DC () Delete
Name: WALSH, JOHN P
Address: 11440 JOG ROAD, SUITE 101
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: DP () Delete
Name: WALSH, DENIS S
Address: 11440 JOG ROAD, SUITE 101
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: VPT () Delete
Name: MONTEIRO, MARIO
Address: 11440 JOG ROAD, SUITE 101
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: S () Delete
Name: WALSH, MARY THERESE
Address: 11440 JOG ROAD, SUITE 101
City-St-Zip: PALM BEACH GARDENS, FL 33418

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

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.

SIGNATURE: MARIO MONTEIRO

VPT

03/29/2007

Electronic Signature of Signing Officer or Director

_____ Date