

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000085510

Entity Name: GSL SOLUTIONS, INC.

FILED  
Jan 25, 2008  
Secretary of State

## Current Principal Place of Business:

1411 N WESTSHORE BLVD  
SUITE 102  
TAMPA, FL 33607

## Current Mailing Address:

1411 N WESTSHORE BLVD  
SUITE 102  
TAMPA, FL 33607

## New Principal Place of Business:

1411 N WESTSHORE BLVD  
SUITE 204  
TAMPA, FL 33607

## New Mailing Address:

1411 N WESTSHORE BLVD  
SUITE 204  
TAMPA, FL 33607

FEI Number: 65-0926109

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GAINES, MICHAEL A  
1411 N WESTSHORE BLVD  
SUITE 102  
TAMPA, FL 33607 US

## Name and Address of New Registered Agent:

SILCOX, DANIEL D  
1411 N WESTSHORE BLVD  
SUITE 204  
TAMPA, FL 33607 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: DANIEL D. SILCOX

01/25/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: GAINES, MICHAEL A  
Address: 1411 N WESTSHORE BLVD #102  
City-St-Zip: TAMPA, FL 33607

Title: T ( ) Delete  
Name: SILCOX, JAMES T  
Address: 1411 N WESTSHORE BLVD #102  
City-St-Zip: TAMPA, FL 33607

Title: S ( ) Delete  
Name: CLENDENIN, TYLER  
Address: 1411 N WESTSHORE BLV #102  
City-St-Zip: TAMPA, FL 33607

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: GAINES, MICHAEL A  
Address: 1411 N WESTSHORE BLVD #204  
City-St-Zip: TAMPA, FL 33607

Title: T (X) Change ( ) Addition  
Name: SILCOX, JAMES T  
Address: 1411 N WESTSHORE BLVD #204  
City-St-Zip: TAMPA, FL 33607

Title: S (X) Change ( ) Addition  
Name: CLENDENIN, TYLER  
Address: 1411 N WESTSHORE BLV #204  
City-St-Zip: TAMPA, FL 33607

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: DANIEL D. SILCOX

DIR.

01/25/2008

Electronic Signature of Signing Officer or Director

Date