

**2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P16000068212

**Entity Name:** G K P MANAGEMENT, INC.**Current Principal Place of Business:**4879 MAGNOLIA ROAD  
MARIANNA, FL 32448**Current Mailing Address:**4879 MAGNOLIA ROAD  
MARIANNA, FL 32448**FEI Number:** APPLIED FOR**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BUSBY, JOE E  
4879 MAGNOLIA ROAD  
MARIANNA, FL 32448 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\_\_\_\_\_  
Date**Officer/Director Detail :**

Title	PRES	Title	VP
Name	BUSBY, JOE E	Name	BRAXTON, MATTHEW W
Address	4879 MAGNOLIA ROAD	Address	3918 PEANUT ROAD
City-State-Zip:	MARIANNA FL 32448	City-State-Zip:	COTTONDALE FL 32431
Title	SEC	Title	VP
Name	BRAXTON, KENNETH P	Name	ANSLEY, JANICE S
Address	3844 VETERAN ROAD	Address	8431 DAVIS ROAD
City-State-Zip:	COTTONDALE FL 32431	City-State-Zip:	LAUREL HILL FL 32567
Title	VP		
Name	GAUDET, ALAIN P		
Address	4879 MAGNOLIA ROAD		
City-State-Zip:	MARIANNA FL 32448		

*I hereby 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 all other like empowered.*

**SIGNATURE:** JOE E. BUSBY**PRESIDENT****04/29/2018**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date