

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 266102

FILED
Apr 29, 2007
Secretary of State

Entity Name: GATLIN'S GO FOR CASH, INC.

Current Principal Place of Business:

GATLIN'S GOFORCASH, INC.
2705-E HANNA AVE.
TAMPA, FL 33610 US

New Principal Place of Business:

Current Mailing Address:

1501 E. COMANCHE AVE
TAMPA, FL 33610

New Mailing Address:

FEI Number: 59-1058326

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GATLIN SR,C E
1501 E COMANCHE AVE
TAMPA, FL 33610 US

Name and Address of New Registered Agent:

GATLIN,ALAN D
1505 E COMANCHE AVE
TAMPA, FL 33610 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: ALAN D. GATLIN

04/29/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: GATLIN SR,C E,
Address: 1501 E COMANCHE AVE.
City-St-Zip: TAMPA, FL 33610

Title: V () Delete
Name: GATLIN,ALAN D,
Address: 1505 E COMANCHE AVE
City-St-Zip: TAMPA, FL 33610

Title: ST () Delete
Name: GATLIN,GRACIE L,
Address: 1501 E COMANCHE AVE
City-St-Zip: TAMPA, FL 33610

Title: V (X) Delete
Name: GATLIN,C ELMON,
Address: 6102 IKE SMITH RD N
City-St-Zip: PLANT CITY, FL 33565

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: GATLIN,ALAN D,
Address: 1505 E. COMANCHE AVE.
City-St-Zip: TAMPA, FL 33610

Title: ST (X) Change () Addition
Name: GATLIN,GRACIE L,
Address: 1501 E COMANCHE AVE
City-St-Zip: TAMPA, FL 33610

Title: V (X) Change () Addition
Name: GATLIN,C ELMON,
Address: 6102 IKE SMITH RD N
City-St-Zip: PLANT CITY, FL 33565

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

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: ALAN D. GATLIN

PD

04/29/2007

Electronic Signature of Signing Officer or Director

Date