2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 483525

Entity Name: G.J.M., INC.

FILED Apr 21, 2005 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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11807 FRONT BEACH ROAD PANAMA CTY BCH, FL 32407

Current Mailing Address: New Mailing Address:

11807 FRONT BEACH ROAD
PANAMA CTY BCH, FL 32407
2415 PARKWOOD DRIVE
PANAMA CTY, FL 32405

FEI Number: 59-1615976 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SOWELL, MARY

11807 FRONT BEACH ROAD

PANAMA CITY, FL 32407 US

SOWELL, MARY

2415 PARKWOOD DRIVE

PANAMA CITY, FL 32405 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: MARY SOWELL 04/21/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: () Change () Addition

 Name:
 SOWELL, JERRY F JR.
 Name:

 Address:
 2415 PARKWOOD DR
 Address:

 City-St-Zip:
 PANAMA CITY, FL 32405
 City-St-Zip:

 Title:
 PD () Delete
 Title:
 PD (X) Change () Addition

 Name:
 SCAPEROTTA, GRETCHEN
 Name:
 SCAPEROTTA, GRETCHEN

 Address:
 2717 JENKS AVE
 Address:
 P.O. BOX 19215

City-St-Zip: PANAMA CITY, FL 32405 City-St-Zip: PANAMA CITY BCH, FL 32417

Title: VD () Delete Title: VD (X) Change () Addition Name: SCAPEROTTA, JOE Name: SCAPEROTTA, JOE

Address: 2717 JENKS AVE Address: P.O. BOX 19215
City-St-Zip: PANAMA CITY, FL 32405
City-St-Zip: PANAMA CITY, FL 32417

Title: ST () Delete Title: () Change () Addition

 Name:
 SOWELL, MARY
 Name:

 Address:
 2415 PARKWOOD DR
 Address:

 City-St-Zip:
 PANAMA CITY, FL 32405
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MARY SOWELL SEC/ 04/21/2005