2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 679766

Entity Name: G.A.V., INC.

FILED Feb 05, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

18500 BRADENTON FT. MYERS, FL 33912

Current Mailing Address: New Mailing Address:

18500 BRADENTON FT. MYERS, FL 33912

FEI Number: 59-2185872 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:

VAN ALST, GERALD A 18500 BRADENTON FT. MYERS, FL 33912 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 VAN ALST, GERALD A,
 Name:
 VAN ALST, GERALD A,

 Address:
 2819 SAPPHIRE CT
 Address:
 18500 BRADENTON

 City-St-Zip:
 TALLAHASSEE, FL 32308
 City-St-Zip:
 FT. MYERS, FL 33912

Title: S () Delete Title: () Change () Addition

 Name:
 FRUCHTL, CLARA,
 Name:

 Address:
 5 SUGAR BUSH CT
 Address:

 City-St-Zip:
 SAVANNAH, GA
 City-St-Zip:

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

 Name:
 MARCHMAN, MARY,
 Name:

 Address:
 2819 SAPPHIRE CT
 Address:

 City-St-Zip:
 TALLAHASSEE, FL 32308
 City-St-Zip:

Title: T () Delete Title: () Change () Addition

 Name:
 ACKERMAN, JUDITH K.
 Name:

 Address:
 ROUTE 45 S
 Address:

 City-St-Zip:
 HARRISBURG, IL 62946
 City-St-Zip:

Title: VPD () Delete Title: () Change () Addition

 Name:
 VAN ALST, JOHN A.
 Name:

 Address:
 LAKE SARA RD
 Address:

 City-St-Zip:
 EFFINGHAM, IL 62401
 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: GERALD A VAN ALST P 02/05/2004