

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000006339

FILED  
Jan 25, 2006  
Secretary of State

Entity Name: GSK SERVICES, INC.

## Current Principal Place of Business:

1139 VERMILLION CIRCLE  
MARIETTA, GA 30061

## New Principal Place of Business:

3139 CUSTER LAKE DRIVE  
MARIETTA, GA 30064

## Current Mailing Address:

1139 VERMILLION CIRCLE  
MARIETTA, GA 30061

## New Mailing Address:

3139 CUSTER LAKE DRIVE  
MARIETTA, GA 30064

FEI Number: 58-2508563

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HANSON, SCOTT  
1747 RUTLEDGE ROAD  
LONGWOOD, FL 32779 US

## Name and Address of New Registered Agent:

BORCHARDT, RONALD  
6331 OAKSHORE DRIVE  
ST. CLOUD, FL 34771 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: RONALD BORCHARDT

01/25/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PCD ( ) Delete  
Name: BUTLER, GORDON R  
Address: 1736 N C.R. 427  
City-St-Zip: LONGWOOD, FL 32750

Title: VD ( ) Delete  
Name: HANSON, SCOTT  
Address: 1747 RUTLEDGE ROAD  
City-St-Zip: LONGWOOD, FL

Title: SD ( ) Delete  
Name: LIENEMANN, KERRI  
Address: 1139 VERMILLION CIRCLE  
City-St-Zip: MARIETTA, GA

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PCD (X) Change ( ) Addition  
Name: BUTLER, GORDON R  
Address: P. O. BOX 952914  
City-St-Zip: LAKE MARY, FL 327952914 US

Title: VD (X) Change ( ) Addition  
Name: BORCHARDT, RONALD  
Address: 6331 OAKSHORE DRIVE  
City-St-Zip: ST. CLOUD, FL 34771 US

Title: SD (X) Change ( ) Addition  
Name: LIENEMANN, KERRI  
Address: 3139 CUSTER LAKE DRIVE  
City-St-Zip: MARIETTA, GA 30064 US

I hereby certify that the information supplied with this filing does not qualify for the 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: GORDON R. BUTLER

PCD

01/25/2006

Electronic Signature of Signing Officer or Director

Date