

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02518

Entity Name: GT ULTRALIGHTS, INC.

FILED
Apr 29, 2008
Secretary of State

Current Principal Place of Business:

3506 LYON SPRINGS RD
SEVIERVILLE, TN 37862 US

New Principal Place of Business:

Current Mailing Address:

3506 LYON SPRINGS RD
SEVIERVILLE, TN 37862 US

New Mailing Address:

FEI Number: 59-2158888 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THOMPSON, GARY
324 NW 106 TERR.
PEMBROKE PINES, FL 33026 US

Name and Address of New Registered Agent:

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:

Title: DP () Delete
Name: THOMPSON, GARY
Address: 4195 HIGHRIDGE WAY
City-St-Zip: SEVIERVILLE, TN 37862

Title: STD () Delete
Name: THOMPSON, CONNIE C
Address: 4195 HIGH RIDGE WAY
City-St-Zip: SEVIERVILLE, TN 37862

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: CONNIE C THOMPSON

STD

04/29/2008

Electronic Signature of Signing Officer or Director

_____ Date