

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000004621

FILED  
Jul 06, 2005  
Secretary of State

**Entity Name:** GBA FINANCIAL PROGRAMS & INSURANCE MARKETING, INC.

**Current Principal Place of Business:**

3478 BUSKIRK AVE. SUITE 300  
PLEASANT HILL, CA 94523

**New Principal Place of Business:**

**Current Mailing Address:**

3478 BUSKIRK AVE. SUITE 300  
PLEASANT HILL, CA 94523

**New Mailing Address:**

FEI Number: 94-2737812

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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: BRACKETT, JOHN  
Address: 3478 BUSKIRK AVE. SUITE 300  
City-St-Zip: PLEASANT HILL, CA 94523

Title: VP ( ) Delete  
Name: TCHERKOYAN, GREGORY  
Address: 3478 BUSKIRK AVE. SUITE 300  
City-St-Zip: PLEASANT HILL, CA 94523

Title: ST ( ) Delete  
Name: TCHERKOYAN, SETA  
Address: 3478 BUSKIRK AVE. SUITE 300  
City-St-Zip: PLEASANT HILL, CA 94523

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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 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: JOHN BRACKETT

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07/06/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date