2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000000323

Entity Name: EAST WEST (GMS) MANAGEMENT CORPORATION

FILED Feb 02, 2007 Secretary of State

			on oromon		
Current Principal Place of Business:			New Principal Place of Business:		
	LAGE SQUAR IAN, VA 23112				
Current Mailing Address:			New Mailing Address:		
	LAGE SQUAR IAN, VA 23112				
FEI Number: 20-3638745 FEI Number Applied For ()			FEI Number Not Applicable () Certificate of Status Desired ()		
Name and	d Address of (Current Registered Agent:	Name and	Address of New Registered Agent:	
F & L COF ONE INDE JACKSON		RIVE, SUITE 1300 202 US			
	e named entity e of Florida.	submits this statement for the p	ourpose of changing i	its registered office or registered agent, or both,	
SIGNATUI	RE:				
	Electron	nic Signature of Registered Age	ent	Date	
Election Ca	mpaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS		
Title: Name: Address: City-St-Zip:	PEARSON, KA	OOD POINTE CT	Title: Name: Address: City-St-Zip:	DST (X) Change () Addition PEARSON, KATHRYN H 5304 BEECHWOOD POINTE CT MIDLOTHIAN, VA 23112 US	
Title: Name: Address: City-St-Zip:	PDM (ARROWSMITH 4800 LAKESHO ORANGE PARI	DRE DR W	Title: Name: Address: City-St-Zip:	PD (X) Change () Addition ARROWSMITH, ROGER S 4800 LAKESHORE DR W ORANGE PARK, FL 32073 US	
Title: Name: Address: City-St-Zip:	AS (BADURA, CHR 5201 WEST SI MIDLOTHIAN, V	HORE ROAD	Title: Name: Address: City-St-Zip:	AS (X) Change () Addition BADURA, CHRISTINE S 5201 WEST SHORE ROAD MIDLOTHIAN, VA 23112 US	
Title: Name: Address: City-St-Zip:	DUBIS, BEVER	DRE DR., NORTH	Title: Name: Address: City-St-Zip:	V (X) Change () Addition DUBIS, BEVERLY 2331 LAKESHORE DR., NORTH ORANGE PARK, FL 32003 US	
Title: Name: Address: City-St-Zip:	() Delete	Title: Name: Address: City-St-Zip:	D () Change (X) Addition GARY, FENCHUK W 13704 BEECHWOOD POINTE ROAD MIDLOTHIAN, VA 23112 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: ROGER S. ARROWSMITH PD 02/02/2007