## 2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# F27664

Entity Name: G & M OF KISSIMMEE, INC.

FILED May 12, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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301 WEST VINE STREET KISSIMMEE, FL 347414433

Current Mailing Address: New Mailing Address:

301 WEST VINE STREET
KISSIMMEE, FL 34741

301 WEST VINE STREET
KISSIMMEE, FL 347414433

FEI Number: 59-2110681 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:

FEE, DONALD FEE, DONALD L
301 WEST VINE STREET
KISSIMMEE, FL 34741 US FEE, DONALD L
301 WEST VINE STREET
KISSIMMEE, FL 34741 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: DON FEE 05/12/2009

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Name: DECURTIS, DAVID Name: FEE, DONALD L

 Address:
 2314 LONGMOORE CT
 Address:
 301 WEST VINE STREET

 City-St-Zip:
 ORLANDO, FL 32835
 City-St-Zip:
 KISSIMMEE, FL 34741

Title: PRES ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 FEE, DONALD
 Name:

 Address:
 301 WEST VINE STREET
 Address:

 City-St-Zip:
 KISSIMMEE, FL 34741
 City-St-Zip:

Title: SEC ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 FEE, DONALD
 Name:

 Address:
 301 WEST VINE STREET
 Address:

 City-St-Zip:
 KISSIMMEE, FL 32741
 City-St-Zip:

Title: TRES ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 FEE, DONALD
 Name:

 Address:
 301 WEST VINE STREET
 Address:

 City-St-Zip:
 KISSIMMEE, FL 32741
 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: DON FEE PRES 05/12/2009