



**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 24, 2007 8:00 am**  
**Secretary of State**

04-24-2007 90013 011 \*\*\*150.00

<b>DOCUMENT # F95000001973</b>		
1. Entity Name <b>GOSSNER MANAGEMENT LIMITED COMPANY</b>		
Principal Place of Business <b>Gossner Management Limited # 2207 One Yonge Street Toronto, ON M5E 1E5</b>	Mailing Address <b>Gossner Management Limited # 2207 One Yonge Street Toronto, ON M5E 1E5</b>	<b>40079166</b>  04182004 No Chg-P CR2E034 (10/03) 4. FEI Number <b>98-0137614</b> 5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>
<b>DO NOT WRITE IN THIS SPACE</b>		
6. Name and Address of Current Registered Agent <b>FENNIMAN, JOHN 735 COLORADO AVENUE STUART, FL 34994</b>		
<b>DO NOT WRITE IN THIS SPACE</b>		
8. 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. I am familiar with, and accept the obligations of registered agent.		
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small> DATE _____		
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PC GOSSNER, ISABELLA #2207 ONE YONGE STREET TORONTO, ON m5e 1e5	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V HEBICH, DORIS SUITE 3401 65 HARBOUR SQUARE TORONTO ONT. M53 2L4 CANADA, <b>M53 2L4</b>	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	ST BERNHARD, ELLA C/O CHAPPELL SUITE 3310 20 QUEEN ST. WEST TORONTO ONT. M5H 3R3 CANADA	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.		
SIGNATURE: <i>Isabella Gossner</i> <b>Isabella Gossner President of Gossner Management Limited Company</b> <b>April 11, 2007</b> <b>416-3679531</b> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #</small>		



# Division of Corporations

ATTACHMENT

## Annual Report

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Document Number

F95000001973

Business Entity Name

GOSSNER MANAGEMENT LIMITED COMPANY

Election Campaign Financing Trust Fund Contribution Yes No

### Officer/Director Name And Address

Title   
 Name (Last, First, Middle, Title)     
 -or- Entity Name   
 Street Address   
 City, State    
 Zip Code & Country

Title   
 Name (Last, First, Middle, Title)     
 -or- Entity Name   
 Street Address   
 City, State    
 Zip Code & Country

Title   
 Name (Last, First, Middle, Title)     
 -or- Entity Name   
 Street Address   
 City, State    
 Zip Code & Country

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 Street Address   
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