

2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

09 APR 23 PM 2:33

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F95000001973

1. Entity Name
GOSSNER MANAGEMENT LIMITED COMPANY



Principal Place of Business

Gossner Management Limited
2207 One Yonge Street
Toronto, ON M5E 1E5

Mailing Address

Gossner Management Limited
2207 One Yonge Street
Toronto, ON M5E 1E5



04182004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
98-0137614

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

FENNIMAN, JOHN
735 COLORADO AVENUE
STUART, FL 34994

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IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1 2009 fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PC
NAME	GOSSNER, ISABELLA
STREET ADDRESS	#2207 ONE YONGE STREET
CITY-ST-ZIP	Toronto, Ontario M5E 1E5 CANADA
TITLE	V
NAME	HEBICH, DORIS
STREET ADDRESS	SUITE 3401 65 HARBOUR SQUARE TORONTO ONT.
CITY-ST-ZIP	M5J 2L4 CANADA
TITLE	ST
NAME	BERNHARD, ELLA
STREET ADDRESS	80 Scollard Street
CITY-ST-ZIP	Toronto, Ontario M5R 1G2 CANADA
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

600152124466
04/23/09--01034--013 **150.00

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IN THIS SPACE**

I hereby certify that the information supplied with this filing does not qualify 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Isabella Gossner

April 13, 2009 (416-3679531)

President of Gossner Management Limited Company



Division of Corporations

Annual Report

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Business Entity Name

GOSSNER MANAGEMENT LIMITED COMPANY

Election Campaign Financing Trust Fund Contribution Yes No

Officer/Director Name And Address

Title ☐ PC ☐

Name (Last, First, Middle, Title) ☐ GOSSNER ☐ ISABELLA ☐ ☐

-or- Entity Name ☐

Street Address ☐ #2207 ONE YONGE STREET ☐

City, State ☐ TORONTO ☐ ON ☐ CANADA

Zip Code & Country ☐ M5E 1E5 ☐

Title ☐ V ☐

Name (Last, First, Middle, Title) ☐ HEBICH ☐ DORIS ☐ ☐

-or- Entity Name ☐

Street Address ☐ SUITE 3401 65 HARBOUR SQUARE TORONTO ☐

City, State ☐ M5J 2L4 ON CANADA ☐ ON ☐

Zip Code & Country ☐ M5J 2L4 ☐

Title ☐ ST ☐

Name (Last, First, Middle, Title) ☐ BERNHARD ☐ ELLA ☐ ☐

-or- Entity Name ☐

Street Address ☐ 80 Scollard Street ☐

City, State ☐ TORONTO ONT. CANADA, ☐

Zip Code & Country ☐ M5R 1G2 ☐

Title ☐

Name (Last, First, Middle, Title) ☐ ☐ ☐ ☐

-or- Entity Name ☐

Street Address ☐

City, State ☐ ☐ ☐

Zip Code & Country ☐ ☐