

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G46661

Entity Name: GAILIND, INC.

FILED
Jan 16, 2009
Secretary of State

Current Principal Place of Business:

2110 WEST 23D STREET
STE. D
PANAMA CITY, FL 32405

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 15441
PANAMA CITY, FL 324065441 US

New Mailing Address:

FEI Number: 59-2315572

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ELSASSER, JOHN ALLEN
2110 WEST 23D STREET
STE. D
PANAMA CITY, FL 32405 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: VD () Delete
Name: SMALLWOOD, JIM L.
Address: 2110 WEST 23RD ST., STE D
City-St-Zip: PANAMA CITY, FL 32405

Title: CPDS () Delete
Name: ELSASSER, JOHN A
Address: PO BOX 15441
City-St-Zip: PANAMA CITY, FL 32406

Title: D () Delete
Name: AYCOCK, SUSAN
Address: 7 LACEBARK LANE
City-St-Zip: ELGIN, SC 29045

Title: D () Delete
Name: MCINTOSH, GAILAND
Address: P O BOX 3995
City-St-Zip: JOHNSON CITY, TN 37602

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:

Title: () Change () Addition
Name:
Address:
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: JOHN ALLEN ELSASSER

PRES

01/16/2009

Electronic Signature of Signing Officer or Director

Date