2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G95515

FILED Apr 20, 2009 Secretary of State

Entity Name: GAMEFISHERMAN, INC.	
Current Principal Place of Business:	New Principal Place of Business:
3290 SE GRAN PARKWAY STUART, FL 34997	
Current Mailing Address:	New Mailing Address:
3290 SE GRAN PARKWAY STUART, FL 34997	
FEI Number: 59-2404828 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:
MATLACK, M. JEANNE 3290 SE GRAN PARKWAY STUART, FL 34997 US	
The above named entity submits this statement for the puin the State of Florida.	rpose of changing its registered office or registered agent, or both,
SIGNATURE:	
Electronic Signature of Registered Agen	t Date
Election Campaign Financing Trust Fund Contribution ().	
OFFICERS AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS

Title: Title: () Delete (X) Change () Addition MATLACK, MICHAEL T. MATLACK, MICHAEL T. Name: Name: 1181 SE BUTTONWOOD CR. Address: 1181 SE BUTTONWOOD CR. Address: City-St-Zip: STUART, FL City-St-Zip: STUART, FL 34997

Title: D () Delete Title: () Change () Addition

 Name:
 MATLACK, M. JEANNE
 Name:

 Address:
 1181 SE BUTTONWOOD CR.
 Address:

 City-St-Zip:
 STUART, FL
 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: M JEANNE MATLACK D/S 04/20/2009