

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K56532

Entity Name: G L'S OARHOUSE, INC.

FILED
Feb 27, 2007
Secretary of State

Current Principal Place of Business:

4415 MICKLER CUTOFF
PONTE VEDRA BEACH, FL 32082 US

New Principal Place of Business:

Current Mailing Address:

4415 MICKLER RD.
PONTE VEDRA BEACH, FL 32082 US

New Mailing Address:

P.O. BOX 926
4415 MICKLER RD
PONTE VEDRA BEACH, FL 32004 US

FEI Number: 59-2934115

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEARY, GENE A SEC
P.O. BOX 926
4415 MICKLER RD
PONTE VEDRA, FL 32004 US

Name and Address of New Registered Agent:

LEARY, GENE A SEC
4415 MICKLER RD
PONTE VEDRA, FL 32004 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: _____

02/27/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: S () Delete
Name: LEARY, GENE A
Address: 4415 MICKLER RD
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: VP (X) Delete
Name: NADER, SHARON
Address: 4415 MICKLER CUTOFF
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: VP (X) Delete
Name: BASS, JASON
Address: 4415 MICKLER CUTOFF
City-St-Zip: PONTE VEDRA, FL 32082

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: S/D (X) Change () Addition
Name: LEARY, GENE A
Address: P.O. BOX 926
City-St-Zip: PONTE VEDRA BEACH, FL 32004

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 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: GENE A. LEARY

S/D

02/27/2007

Electronic Signature of Signing Officer or Director

Date