


**2008 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Feb 11, 2008 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # M76588</b> 1. Entity Name <b>GENERAL TRAINING INTERNATIONAL, INC.</b>	
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Principal Place of Business <b>9604 CORTEZ ROAD WEST 224 BRADENTON, FL 34210 US</b>	Mailing Address <b>P.O. BOX 15045 BRADENTON, FL 34280-5045 US</b>
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<b>DO NOT WRITE IN THIS SPACE</b>
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02052008 No Chg-P CR2E034 (11/05)

4. FEI Number <b>65-0042953</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>

6. Name and Address of Current Registered Agent  <b>DONOVAN, BARBARA 9604 CORTEZ RD WEST UNIT 224 BRADENTON, FL 34210</b>
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<b>DO NOT WRITE IN THIS SPACE</b>
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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, 2008 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>
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PDV STALLSMITH, DENNIS G. 9604 CORTEZ RD WEST UNIT 221 BRADENTON, FL 34210</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>ST DONOVAN, BARBARA 9604 CORTEZ RD. WEST UNIT 224 BRADENTON, FL 34210</b>
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<p>U00000825179 02/20/08-80109-008 150.00</p> <p><b>DO NOT WRITE IN THIS SPACE</b></p>
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.
<b>SIGNATURE:</b> <i>Barbara Donovan</i> <b>SECRETARY</b> <b>2/8/08</b> <b>941-794-6081</b> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR (date) Daytime Phone #</small> <b>BARBARA DONOVAN</b>