

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M92057

FILED
Apr 29, 2011
Secretary of State

Entity Name: GENERAL PARTNERS MANAGEMENT CORP.

Current Principal Place of Business:

% G. MAX BARNES
441 NE 1 ST
CRYSTAL RIVER, FL 34429 US

New Principal Place of Business:

G. MAX BARNES
441 NE 1 ST
CRYSTAL RIVER, FL 34429 US

Current Mailing Address:

% G. MAX BARNES
PO BOX 490
CRYSTAL RIVER, FL 34423 US

New Mailing Address:

FEI Number: 59-2899591 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

BARNES, G. MAX
441 NE 1 ST
CRYSTAL RIVER, FL 34429 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

OFFICERS AND DIRECTORS:

Title: D
Name: BARNES, G. MAX
Address: P.O. BOX 2215
City-St-Zip: CRYSTAL RIVER, FL 34423

Title: D
Name: SANDERS, JAMES T.
Address: 137 DOUGLAS ST.
City-St-Zip: HOMOSASSA, FL

Title: D
Name: MAUGHAN, NELSON W.
Address: 44 CYPRESS BLVD. W.
City-St-Zip: HOMOSASSA, FL

Title: D
Name: PONTICOS, STEPHAN E.
Address: 7 BYRSONIMA CT. W.
City-St-Zip: HOMOSASSA, FL

Title: D
Name: HENIGAR, ROBERT
Address: P.O. BOX 2396
City-St-Zip: CRYSTAL RIVER, FL 34423

I hereby 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 all other like empowered.

SIGNATURE: G MAX BARNES

D

04/29/2011

Electronic Signature of Signing Officer or Director

Date