2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000003563

Entity Name: GP&P INC.

FILED Apr 26, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 5380 RIVERSIDE DRIVE PORT ORANGE, FL 32127 **Current Mailing Address: New Mailing Address:** 5380 RIVERSIDE DRIVE PORT ORANGE, FL 32127 FEI Number: 59-3724730 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: BOSTWICK, JOHN 5380 RIVERSIDE DRIVE PORT ORANGE, FL 32127 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete BOSTWICK, JOHN Name: Name: 5380 RIVERSIDE DRIVE Address: Address: City-St-Zip: PORT ORANGE, FL 32127 City-St-Zip: Title: Title: () Delete () Change () Addition BOSTWICK, SUSAN Name: Name: Address: 5380 RIVERSIDE DRIVE Address: City-St-Zip: PORT ORANGE, FL 32127 City-St-Zip: Title: () Delete Title: () Change () Addition REAVES, KRISTY Name: Name: 5405 ISABELLE Address: Address: City-St-Zip: PORT ORANGE, FL 32127 City-St-Zip: Title: () Delete Title: () Change () Addition Name: GRAVES, ROCKY R Name: 5750 LAKE SHORE GROVE PLACE Address: Address: City-St-Zip: SANFORD, FL 32771 City-St-Zip: Title: () Delete Title: (X) Change () Addition O'NEAL, BLAINE R MITCHELL, HERMAN E Name: Name:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Address:

City-St-Zip:

SIGNATURE: JOHN BOSTWICK CEO 04/26/2004

713 N. CLYDE MORRIS BLVD.

DAYTONA BEACH, FL 32114

Address:

City-St-Zip:

1910 SUGRARTREE CIRCLE

NEW SMYRNA BEACH, FL 32168