

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000003563

FILED
May 09, 2006
Secretary of State

Entity Name: GP&P INC.

Current Principal Place of Business:

478 WESTERN RD.
NEW SMYRNA BEACH, FL 32168

New Principal Place of Business:

Current Mailing Address:

478 WESTERN ROAD
NEW SMYRNA BEACH, FL 32168

New Mailing Address:

FEI Number: 59-3724730 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

BOSTWICK, JOHN
5380 RIVERSIDE DRIVE
PORT ORANGE, FL 32127 US

Name and Address of New Registered Agent:

BOSTWICK, JOHN
478 WESTER ROAD
NEW SMYRNA BEACH, FL 32168 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: _____

05/09/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: BOSTWICK, JOHN
Address: 5380 RIVERSIDE DRIVE
City-St-Zip: PORT ORANGE, FL 32127

Title: D () Delete
Name: BOSTWICK, SUSAN
Address: 5380 RIVERSIDE DRIVE
City-St-Zip: PORT ORANGE, FL 32127

Title: D () Delete
Name: REAVES, KRISTY
Address: 5405 ISABELLE
City-St-Zip: PORT ORANGE, FL 32127

Title: D () Delete
Name: GRAVES, ROCKY R
Address: 5750 LAKE SHORE GROVE PLACE
City-St-Zip: SANFORD, FL 32771

Title: D () Delete
Name: MITCHELL, HERMAN E
Address: 1910 SUGRARTREE CIRCLE
City-St-Zip: NEW SMYRNA BEACH, FL 32168

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: BOSTWICK, JOHN
Address: 478 WESTERN ROAD
City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOHN BOSTWICK

PRES

05/09/2006

Electronic Signature of Signing Officer or Director

Date