

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000007513

FILED
Apr 09, 2005
Secretary of State

Entity Name: GIBSON/GIPSON INC.

Current Principal Place of Business:

2061 WOODSIDE AV.
JACKSONVILLE, FL 32205

New Principal Place of Business:

P.O.BOX 9815
JACKSONVILLE, FL 32208

Current Mailing Address:

2061 WOODSIDE AV.
JACKSONVILLE, FL 32205

New Mailing Address:

P.O.BOX 9815
JACKSONVILLE, FL 32208

FEI Number: 20-1595521

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

GRIFFIN, LYLE B
2061 WOODSIDE AV.
JACKSONVILLE, FL 32205 US

Name and Address of New Registered Agent:

GRIFFIN, LYLE B
P.O.BOX 9815
JACKSONVILLE, FL 32208 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: LYLE GRIFFIN

04/09/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: CHAR () Delete
Name: GIBSON, JOHN A JR.
Address: 2061 WOODSIDE AV.
City-St-Zip: JACKSONVILLE, FL 32205 US

Title: NA.C () Delete
Name: GRIFFIN, NAOMI R
Address: 2061 WOODSIDE AV.
City-St-Zip: JACKSONVILLE, FL 32205 US

Title: BM () Delete
Name: GIBSON, PERTTY
Address: 2061 WOODSIDE AV.
City-St-Zip: JACKSONVILLE, FL 32205 US

Title: BM () Delete
Name: GIBSON, HOOVER
Address: 2061 WOODSIDE AV.
City-St-Zip: JACKSONVILLE, FL 32205 US

Title: BM () Delete
Name: KEMP, CLARECE
Address: 2061 WOODSIDE AV.
City-St-Zip: JACKSONVILLE, FL 32205 US

Title: BM () Delete
Name: GIPSON, MOORE
Address: 2061 WOODSIDE AV.
City-St-Zip: JACKSONVILLE, FL 32205 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: BM (X) Change () Addition
Name: GIBSON, JOHN A JR.
Address: P.O. BOX 9815
City-St-Zip: JACKSONVILLE, FL 32208 US

Title: NA.C (X) Change () Addition
Name: GRIFFIN, NAOMI G
Address: P.O. BOX 9815
City-St-Zip: JACKSONVILLE, FL 32208 US

Title: BM (X) Change () Addition
Name: GIBSON, PERTY E
Address: P.O. BOX 9815
City-St-Zip: JACKSONVILLE, FL 32208 US

Title: BM (X) Change () Addition
Name: GIBSON, MOSES H
Address: P.O. BOX 9815
City-St-Zip: JACKSONVILLE, FL 32208 US

Title: BM (X) Change () Addition
Name: KEMP, CHARLES
Address: P.O. BOX 9815
City-St-Zip: JACKSONVILLE, FL 32208 US

Title: BM (X) Change () Addition
Name: GIPSON, CORA
Address: P.O. BOX 9815
City-St-Zip: JACKSONVILLE, FL 32208 US

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.

SIGNATURE: LYLE GRIFFIN

BA

04/09/2005

Electronic Signature of Signing Officer or Director

Date