2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000010610

Entity Name: GRATEFUL AMERICAN COIN INC.

FILED Feb 02, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

15207 HAMMOCK CHASE COURTT 15207 HAMMOCK CHASE COURT

ODESSA, FL 33556 ODESSA, FL 33556

Current Mailing Address: New Mailing Address:

15207 HAMMOCK CHASE COURTT 15207 HAMMOCK CHASE COURT

ODESSA, FL 33556 ODESSA, FL 33556

FEI Number: 68-0662923 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:

UNITED STATES CORPORATION AGENTS, INC.

13302 WINDING OAKS BLVD

SUITE A-100

BENSON, DEBORAH J

15207 HAMMOCK CHASE CT

ODESSA, FL 33556 US

SUITE A-100 TAMPA, FL 336123425 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: DEBORAH JOYCE BENSON 02/02/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: P () Delete Title: P (X) Change () Addition

Name: BENSON, DEBORAH
Address: 115207 HAMMOCK CHASE COURTT
Address: 15207 HAMMOCK CHASE COURTT
BENSON, DEBORAH
Address: 15207 HAMMOCK CHASE COURT

City-St-Zip: ODESSA, FL 33556 City-St-Zip: ODESSA, FL 33556

Title: S () Delete Title: S (X) Change () Addition Name: BENSON, WILLIAM Name: BENSON, WILLIAM

Address: 15207 HAMMOCK CHASE COURTT Address: 15207 HAMMOCK CHASE COURT

City-St-Zip: ODESSA, FL 33556 City-St-Zip: ODESSA, FL 33556

Title: T () Delete Title: T (X) Change () Addition Name: ROSIER, BETTY Name: GOSLIN, ROBERT

 Name:
 Rosiler, BETT
 Name:
 Gostin, Robert

 Address:
 7211 PAT BLVD
 Address:
 8410 LAVA PLACE

 City-St-Zip:
 TAMPA, FL 33615
 City-St-Zip:
 TAMPA, FL 33611

I hereby certify that the information supplied with this filing does not qualify 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: DEBORAH JOYCE BENSON P 02/02/2008