## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N46729

FILED Jan 25, 2007 Secretary of State

Entity Nan	ne: THE GA	BRIEL HOUSE, INC.			
Current Pi	rincipal Plac	e of Business:	New Principal Plac	e of Business:	
	EETWATER ( S, FL 33912	CT US			
Current Mailing Address:			New Mailing Addre	New Mailing Address:	
	AMIAMI TRAII S, FL 33908	_ 18251 US			
FEI Number:	65-0308014	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:	
15350 SWI	EDWARD B EETWATER ( ERS, FL, FL (				
The above in the State	named entity of Florida.	submits this statement for the p	ourpose of changing its registe	red office or registered agent, or both,	
SIGNATUF					
	Electro	nic Signature of Registered Age	ent	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHAN	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	KITTILSTVED, 7351 RAMBLE		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	EXD () Delete RAVISH, ANNIE R 15350 SWEETWATER CT FORT MYERS, FL 33912 US		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	CARVER, LOF 6043 SWORD		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	P ( RAVISH, EDW 15350 SWEE FT MYERS, FI	TWATER CT	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	S ( TONEY, SAND 14840 LAKE O FT MYERS, FI	DLIVE DRIVE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	

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: EDWARD B. RAVISH **PRES** 01/25/2007