

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000053653

Entity Name: GFC PROPERTIES, INC.

FILED
Apr 02, 2009
Secretary of State

Current Principal Place of Business:

111 N.W 152ND STREET
MANAGER APT 2
NORTH MIAMI BEACH, FL 33169

New Principal Place of Business:

Current Mailing Address:

10441 SW 9TH LANE
PEMBROKE PINES, FL 33025

New Mailing Address:

FEI Number: 65-1013005

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CLAUDE, GINETTE
10441 SW 9TH LANE
PEMBROKE PINES, FL 33025 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPST () Delete
Name: CLAUDE, GINETTE
Address: 10441 S.W. 9TH LANE
City-St-Zip: PEMBROKE PINES, FL 33025

Title: DPST () Delete
Name: CLAUDE, GINETTE F
Address: 10441 SW 9TH LANE
City-St-Zip: PEMBROKE PINES, FL 33025

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

SIGNATURE: GINETTE CLAUDE

DPST

04/02/2009

Electronic Signature of Signing Officer or Director

Date