## 2003 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT# P00000086144

Entity Name: GMI PROFESSIONAL SERVICES, INC.

FILED Sep 09, 2003 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

LOT 20 DOPEY DR

LAKE BUENA VISTA, FL 32830 US

Current Mailing Address: New Mailing Address:

2978 OLD DIXIE HWY PO BOX 22029

SUITE E LAKE BUENA VISTA, FL 32830 US KISSIMMEE, FL 34744

FEI Number: 59-3670390 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

 TODD, ALEXIS
 SNEED, WILLIAM C

 1523 ISON LN
 7380 SAND LAKE ROAD

 OCOEE, FL 34761
 US

 SUITE 500
 ORLANDO, FL 32819 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: WILLIAM SNEED 09/09/2003

Electronic Signature of Registered Agent Date

## Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete Title: P (X) Change ( ) Addition Name: MARK, GORDON Name: SNEED, WILLIAM C

 National
 National

Address: 10050 CANOPY TREE CT Address: 5979 WESTGATE DRIVE City-St-Zip: ORLANDO, FL 32836 City-St-Zip: ORLANDO, FL 32835

Title: T ( ) Delete Title: S (X) Change ( ) Addition Name: THOMAS, DAN Name: CHAMBERS, HAVIS

Address: 1059 SUGARBERRY TR Address: 6388 RALEIGH STREET #2705

Address: 1059 SUGARBERRY TR Address: 6368 RALEIGH 5 TREET #2705
City-St-Zip: OVIEDO, FL 32765 City-St-Zip: ORLANDO, FL 32835 US

 Title:
 S
 () Delete
 Title:
 D
 (X) Change () Addition

 Name:
 TODD, ALEXIS
 Name:
 MARK, FRANCIS G

 Address:
 1523 ISON LN
 Address:
 1145 N. TROPICAL TRAIL

 City-St-Zip:
 OCOEE, FL 34761
 City-St-Zip:
 MERRITT ISLAND, FL 32953 US

Title: D ( ) Change (X) Addition

Name: Name: DICKISON, GARY R
Address: Address: PO BOX 872

City-St-Zip: City-St-Zip: DAUPHIN ISLAND, FL 36528 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT E. WHITING, JR V 09/09/2003