

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000112133

FILED
Jan 24, 2009
Secretary of State

Entity Name: GAMMA PROBE CONSULTING CORPORATION

Current Principal Place of Business:

UNIVERSITY OF SOUTH FLORIDA
30273 USF HOLLY DR.
TAMPA, FL 336203027 US

New Principal Place of Business:

Current Mailing Address:

UNIVERSITY OF SOUTH FLORIDA
30273 USF HOLLY DR.
TAMPA, FL 336203027 US

New Mailing Address:

P.O. BOX 46247
TAMPA, FL 33646 US

FEI Number: 59-3699678

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PECKAHM, DARIEN G P
15215 AMBERLY DR
#903
TAMPA, FL 33647 US

Name and Address of New Registered Agent:

LEWIS PECKHAM, JEANNE M P
15215 AMBERLEY DR
#903
TAMPA, FL 33647 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: JEANNE M. LEWIS PECKHAM

01/24/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: PECKHAM, DARIEN P
Address: 15215 AMBERLY DR #903
City-St-Zip: TAMPA, FL 33647

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: LEWIS PECKHAM, JEANNE M P
Address: 15215 AMBERLY DR #903
City-St-Zip: TAMPA, FL 33647

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: JEANNE M. LEWIS PECKHAM

P

01/24/2009

Electronic Signature of Signing Officer or Director

Date