2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED DOCUMENT # P02000062479 Apr 17, 2007 08:00 Al Secretary of State 1. Entity Name G M C OF LANTANA, INC. Principal Place of Business Mailing Address 630 MAPLEWOOD DRIVE 630 MAPLEWOOD DRIVE 100 JUPITER, FL 33458 JUPITER, FL 33458 CR2E034 (11/05) 04142007 No Chq-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 04-3683037 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent Langer Barrier TAYLOR, WILLIAM E DO NOT WRITE 630 MAPLEWOOD DRIVE 100 IN THIS SPACE JUPITER, FL 33458 8. 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. I am familiar with, and accept SIGNATURE_ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2007 Fee will be \$550.00 10. OFFICERS AND DIRECTORS TITLE SOLOMON, JOHN C II NAME 630 MAPLEWOOD DRICE, #100 STREET ADDRESS JUPITER, FL 33458 CITY-ST-ZIP TITLE PD GRAZIOTTO, RAYMOND E NAME 630 MAPLEWOOD DRIVE, #100 STREET ADDRESS CITY-ST-ZIP JUPITER, FL 33458 **SCFO** TITLE TAYLOR, WILLIAM E NAME STREET ADDRESS 630 MAPLEWOOD DRIVE, #100 DO NOT WRITE CITY-ST-ZIP JUPITER, FL 33458 IN THIS SPACE NAME STREET ADDRESS CITY-ST-7IP STREET ADDRESS CITY-ST-ZIP TITLE NAME

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if

SIGNATURE: William C. Ay William C. Ay
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

STREET ADDRESS CITY-ST-ZIP

4-16-07

561-625-9443

Daytime Phone #