2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000037375

Entity Name: GAM DEVELOPMENT COMPANY

FILED Apr 06, 2008 Secretary of State

Current Principal Place of Business:			New Prince	New Principal Place of Business:	
	SLEY AVE.				
SUITE C ORANGE F	PARK, FL 3	2073			
Current Mailing Address:			New Maili	New Mailing Address:	
PO BOX 15	_				
	PARK, FL 3	2067			
FEI Number:	16-1660060	FEI Number Applied For()	FEI Number Not App	licable () Certificate of Status Desired ()	
Name and	Address of	Current Registered Agent:	Name and	Address of New Registered Agent:	
1730 KING STE. C	ICZ, JOHN SLEY AVE. PARK, FL 3				
			urpose of changing i	ts registered office or registered agent, or both,	
in the State		y submits this statement for the p	urpose or changing i	is registered office of registered agent, or both,	
SIGNATURE:					
	Electr	onic Signature of Registered Age	nt	Date	
Election Can	npaign Financ	ing Trust Fund Contribution ().			
OFFICERS AND DIRECTORS: ADDI				IS/CHANGES TO OFFICERS AND DIRECTORS:	
Title:		() Delete	Title:	D (X) Change () Addition	
Name: Address:	MILLER, GAI 2361 BRIDG		Name: Address:	MILLER, GARY A 6891 OLD CHURCH ROAD	
City-St-Zip:		E SPRINGS, FL 32043	City-St-Zip:	GREEN COVE SPRINGS, FL 32043	
Title:		() Delete	Title:	() Change () Addition	
Name: Address:	WORSOWIC 4127 TORING		Name: Address:		
City-St-Zip:		LLE, FL 32244	City-St-Zip:		
Title:		() Delete	Title:	() Change () Addition	
Name: Address:	PETERSEN,	SLOUGH WALK	Name: Address:		
City-St-Zip:		RK, FL 32003	City-St-Zip:		
Title:		() Delete	Title:	() Change () Addition	
Name:	LAUGHLIN, C		Name:		
Address: City-St-Zip:	1268 PIRATE ORANGE PA	RK, FL 32003	Address: City-St-Zip:		
Title:		() Delete	Title:	() Change () Addition	
Name:	LEWIS, JANI		Name:		
Address: City-St-Zip:		VOOD FOREST DRIVE RK, FL 32003	Address: City-St-Zip:		
Title:		() Delete	Title:	VP () Change (X) Addition	
Name:			Name:	PATRICK, TODD A	
Address:			Address:	2773 PEBBLERIDGE CT	
City-St-Zip:			City-St-Zip:	ORANGE PARK, FL 32073	

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: CHARLES B. LAUGHLIN T 04/06/2008