

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000037375

FILED  
Apr 17, 2009  
Secretary of State

Entity Name: GAM DEVELOPMENT COMPANY

**Current Principal Place of Business:**

1730 KINGSLEY AVE.  
SUITE C  
ORANGE PARK, FL 32073

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 1527  
ORANGE PARK, FL 32067

**New Mailing Address:**

1730 KINGSLEY AVENUE  
SUITE C  
ORANGE PARK, FL 32073

FEI Number: 16-1660060

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

WORSOWICZ, JOHN M  
1730 KINGSLEY AVE.  
STE. C  
ORANGE PARK, FL 32073 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: D ( ) Delete  
Name: MILLER, GARY A  
Address: 6891 OLD CHURCH ROAD  
City-St-Zip: GREEN COVE SPRINGS, FL 32043

Title: P ( ) Delete  
Name: WORSOWICZ, JOHN M  
Address: 4127 TORINO PLACE  
City-St-Zip: JACKSONVILLE, FL 32244

Title: VP ( ) Delete  
Name: PETERSEN, DAVID S  
Address: 1777 LONG SLOUGH WALK  
City-St-Zip: ORANGE PARK, FL 32003

Title: T ( ) Delete  
Name: LAUGHLIN, CHARLES B  
Address: 1268 PIRATES COVE LN  
City-St-Zip: ORANGE PARK, FL 32003

Title: S ( ) Delete  
Name: LEWIS, JANET S  
Address: 346 HOLLYWOOD FOREST DRIVE  
City-St-Zip: ORANGE PARK, FL 32003

Title: VP ( ) Delete  
Name: PATRICK, TODD A  
Address: 2773 PEBBLERIDGE CT  
City-St-Zip: ORANGE PARK, FL 32073

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: CHARLES LAUGHLIN

T

04/17/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date