2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000037375

Entity Name: GAM DEVELOPMENT COMPANY

FILED Apr 17, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 1730 KINGSLEY AVE. SUITE C ORANGE PARK, FL 32073 **Current Mailing Address: New Mailing Address:** PO BOX 1527 1730 KINGSLEY AVENUE SUITE C ORANGE PARK, FL 32067 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: Name and Address of New Registered Agent: WORSOWICZ, JOHN M 1730 KINGSLEY AVE. STE. C ORANGE PARK, FL 32073 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition Name: MILLER, GARY A Name: 6891 OLD CHURCH ROAD Address: Address: City-St-Zip: GREEN COVE SPRINGS, FL 32043 City-St-Zip: Title: Title: () Delete () Change () Addition Name: WORSOWICZ, JOHN M Name: 4127 TORINO PLACE Address: Address: JACKSONVILLE, FL 32244 City-St-Zip: City-St-Zip: () Delete Title: Title: () Change () Addition PETERSEN, DAVID S Name: Name: 1777 LONG SLOUGH WALK Address: Address: City-St-Zip: ORANGE PARK, FL 32003 City-St-Zip: Title: () Delete Title: () Change () Addition LAUGHLIN, CHARLES B Name: Name: Address: 1268 PIRATES COVE LN Address: City-St-Zip: ORANGE PARK, FL 32003 City-St-Zip: Title: Title: () Delete () Change () Addition Name: LEWIS, JANET S Name: 346 HOLLYWOOD FOREST DRIVE Address: Address: City-St-Zip: ORANGE PARK, FL 32003 City-St-Zip: Title: () Delete Title: () Change () Addition PATRICK, TODD A Name: Name: 2773 PEBBLERIDGE CT Address: Address: 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 LAUGHLIN T 04/17/2009