


# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 26, 2007 8:00 am**  
**Secretary of State**

04-26-2007 90237 015 \*\*\*150.00

DOCUMENT # P03000068609	
1. Entity Name G & G MONEY SHACK, INC.	

Principal Place of Business 107 FIRST STREET MELROSE, FL 32666	Mailing Address PO BOX 479 MELROSE, FL 32666
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**DO NOT WRITE IN THIS SPACE**

40084886



04222007 No Chg-P CR2E034 (11/05)

4. FEI Number 56-2371385	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

GUNTER, MICHELLE W  
107 1ST STREET  
MELROSE, FL 32666

**DO NOT WRITE IN THIS SPACE**

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 the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2007 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PT GUNTER, MICHELLE W PO BOX 479 MELROSE, FL 32666
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GUNTER, RICHARD L PO BOX 479 MELROSE, FL 32666
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP WHITE, SUZANNE C 7560 NW 1ST COURT PEMBROKE PINES, FL 33024
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S MCNEIL, DOROTHY H 422 NORTH STATE RD 21 HAWTHORNE, FL 32640
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE IN THIS SPACE**

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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Michelle W. Gunter - MICHELLE W. GUNTER 4/20/07 352-258-6492

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #