2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000071129

Entity Name: GMR LAND CORPORATION

GAVARNY, EDWARD C

12491 OLD CRYSTAL RIVER ROAD

BROOKSVILLE, FL 34601 US

Name:

Address:

City-St-Zip:

FILED Mar 04, 2008 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
8040 OLD COUNTY ROAD 54 NEW PORT RICHEY, FL 34653				14525 SHADY HILLS ROAD SPRING HILL, FL 34610	
Current M	lailing Addre	ss:	New Mailing Addre	New Mailing Address:	
8040 OLD COUNTY ROAD 54 NEW PORT RICHEY, FL 34653				14525 SHADY HILLS ROAD SPRING HILL, FL 34610	
FEI Number	: 20-0061577	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	d Address of	Current Registered Agent:	Name and Address	Name and Address of New Registered Agent:	
GIGLIOTTI, JOSEPH 8040 OLD COUNTY ROAD 54 NEW PORT RICHEY, FL 34653 US			14525 SHADY HILLS	GIGLIOTTI, JOSEPH 14525 SHADY HILLS ROAD SPRING HILL, FL 34610 US	
	e named entity e of Florida.	submits this statement for the	e purpose of changing its register	ed office or registered agent, or both,	
SIGNATURE:				03/04/2008	
	Electro	nic Signature of Registered A	gent	Date	
Election Ca	mpaign Financir	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	V (RHODES, JER 15719 CENTU HUDSON, FL	RY DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	P (GIGLIOTTI, JO P. O. BOX 147 BRADENTON,	92	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	MERUCCI, LO	MEMORIAL HIGHWAY	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title:	V () Delete	Title:	() Change () Addition	

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.

Name:

Address:

City-St-Zip:

SIGNATURE: EDWARD C. GAVARNY V 03/04/2008