2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 20, 2009
Secretary of State

DOCUMENT# P03000091826

Entity Name: GAIACOMM INTERNATIONAL CORPORATION

Current Principal Place of Business:

1674 WESTMINISTER AVE
JACKSONVILLE, FL 32210

New Principal Place of Business:

Current Mailing Address:

365 W SILVERTHORN LANE
ST AUGUSTINE, FL 32095

New Mailing Address:

365 W SILVERTHORN LANE
PONTE VEDRA, FL 32081

FEI Number: 54-2122505 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

HORNE, DAVID H JR
1674 WESTMINISTER AVE
JACKSONVILLE, FL 32210 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:	PDC	( ) Delete
Name:	HORNE, DAVID H JR.	
Address:	1674 WESTMINISTER AVENUE	
City-St-Zip:	JACKSONVILLE, FL 322101255	
Title:	VDT	( ) Delete
Name:	THOMAS, DAN J JR.	
Address:	365 W SILVERTHORN LANE	
City-St-Zip:	PONTE VEDRA, FL 32081	
Title:	DS	( ) Delete
Name:	COTTON, ROB S	
Address:	1522 DUKE HALLOW	
City-St-Zip:	TRAVERSE CITY, MI 49686	
Title:	DTCO	( ) Delete
Name:	BEN-HUR, JUDAH DR.	
Address:	19312 S. GUNLOCK AVENUE	
City-St-Zip:	CARSON, GA 90746	
Title:	D	( ) Delete
Name:	HORNE, JAMES	
Address:	1675 COUNTRY WALK DR	
City-St-Zip:	ORANGE PARK, FL 32003	

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:	

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: DAN J THOMAS JR VDT 04/20/2009

Electronic Signature of Signing Officer or Director — Date