2005 FOR PROFIT CORPORATION ANNUAL REPORT

May 31, 2005 08:00 AM Secretary of State DOCUMENT # P03000097118 GUMBY'S OF WEST VIRGINIA, INC. Principal Place of Business Mailing Address 7731 WEST NEWBERRY ROAD 7731 WEST NEWBERRY ROAD GAINESVILLE, FL 32606 GAINESVILLE, FL 32606 --- and amortismic profession appropriate a 05232005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number NOT APPLICABLE Not Applicable in mer eine general bereiter befinde ein CHARLE COUNTY OF THE COUNTY OF THE COUNTY OF THE \$8.75 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent DO NOT WRITE HIPPLER, CHANCE 7731 WEST NEWBERRY ROAD GAINESVILLE, FL 32606 IN THIS SPACE 3. 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, typed or printed name of registered agent and little if applicable (NOTE: Registered Agent signature required when reinstalling) DATE 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 \$5.00 May Be in accordance with s. 607.193(2)(b), F.S., the Trust Fund Contribution. Added to Fees corporation did not receive the prior notice. Due by September 7, 2005 10. OFFICERS AND DIRECTORS PTD TITLE HIPPLER, CHANCE NAME 7731 WEST NEWBERRY ROAD STREET ADDRESS CITY-ST-ZIP GAINESVILLE, FL 32606 VSD TITLE O'BRIEN, JEFF NAME STREET ADDRESS 7731 WEST NEWBERRY ROAD Line of the Paris of the Paris of the Control GAINESVILLE, FL 32606 CITY-ST-ZIP NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS COMPANY STANFOR GCCY-ST-7IP

12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), 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

FILED

Davime Phone