2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P03000151738 FILED 1. Entity Name **DWIGHT MORGAN GC INC.** Jul 16, 2008 08:00 AM **Secretary of State** Principal Place of Business Mailing Address 895 NW 80 TERRACE 895 NW 80 TERRACE MARGATE, FL 33063 MARGATE, FL 33063 07132008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-0447018 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent MORGAN, DWIGHT DO NOT WRITE 895 NW 80 TERRACE MARGATE, FL 33063 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 \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 In accordance with s. our. receive the prior notice.c. corporation did not receive the prior notice.c. In accordance with s. 607.193(2)(b), F.S., the Trust Fund Contribution. Added to Fees Due by September 12, 2008 315, 14 - 11 OFFICERS AND DIRECTORS 10. TITLE , of all NAME -MORGAN, DWIGHT U00000955164 STREET ADDRESS 895 NW 80 TERRACE 07/16/08-80004-025 150.00 CITY-ST-ZIP MARGATE, FL 33063 TITLE MORGAN, DREW NAME STREET ADDRESS 895 NW 80 TERRACE CITY-ST-ZIP MARGATE, FL 33063 TITLE MORGAN, KATHRYN 895 NW 80 TERRACE STREET ADDRESS DO NOT WRITE MARGATE, FL 33063 CITY-ST-ZiP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 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. MUGL SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR