2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000004606

Entity Name: GEMUWYNE, INC.

FILED Aug 20, 2008 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
1440 FLAG LAKE PARI	LER BLVD K, FL 33403				
Current Mailing Address:			New Mailing Address:		
1440 FLAGLER BLVD LAKE PARK, FL 33403					
FEI Number:	57-0486502	FEI Number Applied For () FEI	Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of Cu	rrent Registered Agent:	Name and Address	of New Registered Agent:	
GORDON, 1440 FLAG LAKE PARI	LER BLVD	US			
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	
	•	2)(b), F.S., the corporation did not recei	ive the prior notice.		
Election Campaign Financing Trust Fund Contribution (). OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () DO ANDERSON, RHO 925 32 ST W PALM BEACH,	NDA	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	V () DO BELL, PATRICIA 1552 W 17 ST RIVIERA BEACH,		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	S () DO GORDON, KATIE 1504 W 15 ST RIVIERA BEACH,		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	T () DO HUTLEY, MARY 925 32 ST W PALM BEACH,		Title: Name: Address: City-St-Zip:	() 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.

SIGNATURE: RHONDA ANDERSON PRES 08/20/2008