## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000030964

Entity Name: GPF MARKETING, INC.

FILED Apr 28, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

801 W. STATE ROAD 436 SUITE 2021 801 W. STATE ROAD 436

ALTAMONTE SPRINGS, FL 32714 SUITE 2023

ALTAMONTE SPRINGS, FL 32714

Current Mailing Address: New Mailing Address:

801 W. STATE ROAD 436 SUITE 2021 801 W. STATE ROAD 436

ALTAMONTE SPRINGS, FL 32714 SUITE

ALTAMONTE SPRINGS, FL 32714

FEI Number: 34-1979612 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SADDLER, HOWARD A
801 W. STATE ROAD 436 SUITE 2021
SADDLER, HOWARD A
801 W. STATE ROAD 436

ALTAMONTE SPRINGS, FL 32714 US SUITE

ALTAMONTE SPRINGS, FL 32714 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: HOWARD A. SADDLE 04/28/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P ( ) Delete Title: P (X) Change ( ) Addition

 Name:
 SADDLER, HOWARD A P/T
 Name:
 SADDLER, HOWARD A P/T

 Address:
 801 W. STATE ROAD 436 SUITE 2021
 Address:
 801 W. STATE ROAD 436 SUITE 2023

 City-St-Zip:
 ALTAMONTE SPRINGS, FL 32714
 City-St-Zip:
 ALTAMONTE SPRINGS, FL 32714

Title: CEO ( ) Delete Title: CEO (X) Change ( ) Addition Name: CHANBERS, EGBERT R VP/S Name: CHANBERS, EGBERT R VP/S

Address: 801 W. STATE ROAD 436, SUITE 2021 Address: 801 W. STATE ROAD 436, SUITE 2023
City-St-Zip: ALTAMONTE SPRINGS, FL 32714 City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: VP (X) Delete Title: ( ) Change ( ) Addition Name: HODGE, MELVIN E VP Name:

 Name:
 HODGE, MELVIN E VP
 Name:

 Address:
 801 W. STATE ROAD 436, SUITE 2021
 Address:

 City-St-Zip:
 ALTAMONTE SPRINGS, FL 32714
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: EGBERT R. CHAMBERS VP 04/28/2006