2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000054992

Entity Name: ONE FOR THE GIPPER, INC.

FILED May 20, 2008 Secretary of State

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

2238 CLEMATIS STREE 3133 REGATTA CIRCLE SARASOTA, FL 34239 SARASOTA, FL 34231

Current Mailing Address: New Mailing Address:

2238 CLEMATIS STREE 3133 REGATTA CIRCLE SARASOTA, FL 34239 SARASOTA, FL 34231

FEI Number: 20-5753843 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

KEVIN DRAKE, P.A.

KEVIN DRAKE, P.A.

100 1ST.

KEVIN DRAKE, P.A.

100 1ST.

SARASOTA, FL FL. US SARASOTA, FL 34236 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: 05/20/2008

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title:

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Name:
 GIPS, JERRY M
 Name:
 GIPS, JERRY M

 Address:
 2238 CLEMATIS STREE
 Address:
 3133 REGATTA CIRCLE

 City-St-Zip:
 SARASOTA, FL 34239
 City-St-Zip:
 SARASOTA, FL 34231

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

Name: GIPS, LUANN Name: GIPS, LUANN

Address: 2238 CLEMATIS STREE Address: 3133 REGATTA CIRCLE
City-St-Zip: SARASOTA, FL 34239 City-St-Zip: SARASOTA, FL 34239

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: JERRY GIPS DPT 05/20/2008