

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000057062

Entity Name: GFFL8 MANAGEMENT, INC.

FILED
Sep 16, 2009
Secretary of State

Current Principal Place of Business:

435 DEVON PARK DR., 500 BUILDING
WAYNE, PA 19087

New Principal Place of Business:

Current Mailing Address:

435 DEVON PARK DR., 500 BUILDING
WAYNE, PA 19087

New Mailing Address:

1628 JFK BLVD
SUITE 2300
PHILADELPHIA, PA 19103

FEI Number: 20-8995372

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MUNROE, W. BRADLEY ESQ.
239 E. VIRGINIA ST.
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

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

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: MR. () Delete
Name: WELLENBUSER, JOSEPH
Address: 435 DEVON PARK DR, 500 BUILDING
City-St-Zip: WAYNE, PA 19087 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MEBR (X) Change () Addition
Name: WELLENBUSER, JOSEPH
Address: 435 DEVON PARK DR, 500 BUILDING
City-St-Zip: WAYNE, PA 19087 US

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: JOSEPH WELLENBUSER

MEBR

09/16/2009

Electronic Signature of Signing Officer or Director

_____ Date