2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000121455

Entity Name: THE GATLING-FLETCHER COMPANY

FILED Apr 30, 2008 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:	
	LOW BUTTE MERE, FL 347			
Current Mailing Address:			New Mailing Address:	
	LOW BUTTE MERE, FL 347			
FEI Number	: 26-1412072	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and	d Address of	Current Registered Agent:	Name and Address	of New Registered Agent:
14479 YEL	R JONES, SH LLOW BUTTE MERE, FL 347	RFLY ROAD		
	e named entity e of Florida.	submits this statement for the	ourpose of changing its registere	ed office or registered agent, or both,
SIGNATU	RE:			
	Electro	nic Signature of Registered Ag	ent	Date
Election Ca	mpaign Financir	ng Trust Fund Contribution ().		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR	
Title: Name: Address: City-St-Zip:	FLETCHER JO) Delete DNES, SHARON W BUTTERFLY ROAD E, FL 34786	Title: Name: Address: City-St-Zip:	() Change () Addition
Fitle: Name: Address: City-St-Zip:	JONES, CLIFT	W BUTTERFLY ROAD	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	FLETCHER, S	W BUTTERFLY ROAD	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	JONES GATLI) Delete NG, MARGARET W BUTTERFLY ROAD E, FL 34786	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address:	GATLING NUN) Delete NALLY, TERRI W BUTTERELY ROAD	Title: Name: Address:	() 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.

City-St-Zip:

SIGNATURE: SHARON FLETCHER JONES P 04/30/2008

City-St-Zip:

WINDERMERE, FL 34786