## 2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

## DOCUMENT# P09000000980

Entity Name: G&T MANUFACTURING, INC.

FILED Dec 21, 2009 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
476 SOUTHRIDGE INDUSTRIAL DRIVE TAVARES, FL 327789118				476 SOUTHRIDGE INDUSTRIAL DRIVE TAVARES, FL 32778			
Current Mailing Address:				New Mailing Address:			
476 SOUTHRIDGE INDUSTRIAL DRIVE TAVARES, FL 327789118				476 SOUTHRIDGE INDUSTRIAL DR TAVARES, FL 32778			
FEI Number:	26-4004359	FEI Number Applied For ( )	FEI Nun	nber Not Appli	icable ( )	Certificate of Statu	s Desired ( )
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:							
NRAI SERVICES, INC. 2731 EXECUTIVE PARK DR., SUITE 4 WESTON, FL 33331 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:							
OFFICERS AND DIRECTORS: Title: D ( ) Delete				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:  Title: ( ) Change ( ) Addition			
Name: Address: City-St-Zip:	MALKOWSKI, MI 476 SOUTHRIDG TAVARES, FL 32	E INDUSTRIAL DRIVE		Name: Address: City-St-Zip:			
Title: Name: Address: City-St-Zip:	D () E HARTONG, HENE 8 SOUND SHORE GREENWICH, CT	DRIVE #265		Title: Name: Address: City-St-Zip:	()	Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D () E MACTAGGART, IA 8 SOUND SHORE GREENWICH, CT	E DRIVE #265		Title: Name: Address: City-St-Zip:	()	Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D () E MCCABE, JOAN ' 8 SOUND SHORE GREENWICH, CT	E DRIVE #265		Title: Name: Address: City-St-Zip:	COTTRELL, JOH	GE INDUSTRIAL DR	
Title: Name: Address: City-St-Zip:	D () E HARTNETT, KEVI 8 SOUND SHORE GREENWICH, CT	E DRIVE #265		Title: Name: Address: City-St-Zip:	()	Change ( ) Addition	
Title: Name: Address: City-St-Zip:	()[	Delete		Title: Name: Address: City-St-Zip:	SHAFFER, PAU	GE INDUSTRIAL DR	

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: PAUL W. SHAFFER CFO 12/21/2009