

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000039871

FILED
Apr 30, 2012
Secretary of State

Entity Name: THE GILMORE TRUST INC

Current Principal Place of Business:

914 JASMINE STREET
CELEBRATION, FL 34747

New Principal Place of Business:

791 OAK SHADOWS DRIVE
CELEBRATION, FL 34747

Current Mailing Address:

P.O. BOX 470581
CELEBRATION, FL 34747

New Mailing Address:

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

GILMORE, LISA J
914 JASMINE STREET
CELEBRATION, FL 34747 US

Name and Address of New Registered Agent:

GILMORE, LISA J
791 OAK SHADOWS DRIVE
CELEBRATION, FL 34747 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: _____

Electronic Signature of Registered Agent

04/30/2012

Date

OFFICERS AND DIRECTORS:

Title: P
Name: GILMORE, DAVID S
Address: 791 OAK SHADOWS DRIVE
City-St-Zip: CELEBRATION, FL 34747

Title: D
Name: GIMORE, LISA J
Address: 791 OAK SHADOWS DRIVE
City-St-Zip: CELEBRATION, FL 34747

Title: D
Name: GILMORE, BARBARA J
Address: 791 OAK SHADOWS DRIVE
City-St-Zip: CELEBRATION, FL 34747

I hereby 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 all other like empowered.

SIGNATURE: LISA J GILMORE

D

04/30/2012

Electronic Signature of Signing Officer or Director

Date