2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000038329

Entity Name: GOLD STANDARD, INC.

FILED Apr 19, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 320 W. KENNEDY BLVD **STE 400** TAMPA, FL 33606 **Current Mailing Address: New Mailing Address:** 320 W. KENNEDY BLVD STE 400 TAMPA, FL 33606 US FEI Number: 59-3171676 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: THOMAS, RUSSELL S 320 W KENNEDY BLVD SUITE 400 TAMPA, FL 33606 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 Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: DCFO (X) Change () Addition THOMAS, RUSSELL Name: Name: THOMAS, RUSSELL 320 W KENNEDY BLVD STE 400 320 W KENNEDY BLVD STE 400 Address: Address: TAMPA, FL 33606 City-St-Zip: City-St-Zip: TAMPA FL 33606 Title: Title: () Delete (X) Change () Addition REYNOLDS, BARRY Name: LOMBARDI, JOHN Name: 374 WHITMORE BLDG 44 MONTGOMERY STREET STE 4010 Address: Address: AMHERST, MA 01003 SAN FRANCISCO, CA 94104 City-St-Zip: City-St-Zip: () Delete (X) Change () Addition Title: Title: MCGURN, KENNETH MCGURN, KENNETH Name: Name: 101 SE 2ND PLACE, STE 202 101 SE 2ND PLACE, STE 202 Address: Address: GAINESVILLE, FL 32601 City-St-Zip: GAINESVILLE, FL 32601 City-St-Zip: Title: () Delete Title: () Change () Addition LOWY, SHERMAN Name: Name: Address: 4800 WILDWOODE DRIVE Address: City-St-Zip: DELRAY BCH, FL 33445 City-St-Zip: Title: Title: () Delete () Change () Addition HALPERIN, JEROME Name: Name: 15401 TIERRA DR Address: Address: City-St-Zip: SILVER SPRING, MD 20906 City-St-Zip: () Delete Title: Title: () Change () Addition Name: ANGEL, JACK Name: Address: 8 WINDSOR LANE Address: City-St-Zip: City-St-Zip: COS COB, CT 06807

I hereby certify that the information supplied with this filing does not qualify for the 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: RUSSELL THOMAS DCEO 04/19/2006