


**2008 FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 14, 2008 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P93000057393</b>	
1. Entity Name <b>GAFFER'S, INC.</b>	

Principal Place of Business <b>5512 SE NASSAU TERRACE STUART, FL 34997 US</b>	Mailing Address <b>5512 SE NASSAU TERRACE STUART, FL 34997 US</b>
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**DO NOT WRITE IN THIS SPACE**

04122008 No Chg-P CR2E034 (11/05)

4. FEI Number <b>65-0431918</b>	Applied For
	Not Applicable

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**GORNEY, THOMAS P  
5512 SOUTHEAST NASSAU TERRACE  
STUART, FL 34997**

**DO NOT WRITE IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2008 Fee will be \$350.00**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD GORNEY, THOMAS P 5512 SOUTHEAST NASSAU TERRACE STUART, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVST GORNEY, YVONNE A 5512 SOUTHEAST NASSAU TERRACE STUART, FL
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04/24/08-80084-008 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  **THOMAS P. GORNEY**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04.12.2008 772 288-5552  
Date Daytime Phone #