2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000068847

Entity Name: GI PROS, INC.

Address:

City-St-Zip:

685 LISMORE LANE

NAPLES, FL 34108

FILED Apr 27, 2005 Secretary of State

Littley Iva	ine. On Noc), IIVO.			
Current Principal Place of Business:			New Principal Place of Business:		
1064 GOC NAPLES, I	DDLETTE RD FL 34102	N			
Current Mailing Address:			New Mailing Address:		
1064 GOO NAPLES, I	DDLETTE RD I FL 33940	N			
FEI Number	: 65-0439300	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:		
STE 400	CAVOY EL OAK DR FL 33963 US				
	e named entity e of Florida.	submits this statement for the p	ourpose of changing its registered	d office or registered agent, or both,	
SIGNATUI	RE:				
	Electro	nic Signature of Registered Age	ent	Date	
Election Ca	mpaign Financir	ng Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	VP (GOTSIS, PERI 4951 GULFSH NAPLES, FL 3	ORE BLVD N	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	P (PHILLIPS, RA) Delete YMOND W	Title: Name:	() Change () Addition	

Address:

City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: RAYMOND W. PHILLIPS P 04/27/2005