

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000022550

Entity Name: G T SURFLINES INC.

FILED
Jan 22, 2008
Secretary of State

Current Principal Place of Business:

39 OCEANWOODS DRIVE
SAINT AUGUSTINE, FL 32080

New Principal Place of Business:

Current Mailing Address:

39 OCEANWOODS DRIVE
SAINT AUGUSTINE, FL 32080

New Mailing Address:

FEI Number: 59-3303796

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HALL, CHARLES E JR.
77 ALMERIA STREET
ST. AUGUSTINE, FL 32084 US

Name and Address of New Registered Agent:

TAYLOR, M K
39 OCEAN WOODS DRIVE EAST
ST. AUGUSTINE, FL 32080 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: M. KATINA TAYLOR

01/22/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPT () Delete
Name: TAYLOR, GREGORY S
Address: 39 OCEANWOODS DRIVE
City-St-Zip: SAINT AUGUSTINE, FL 32080

Title: DVS () Delete
Name: TAYLOR, M K
Address: 39 OCEANWOODS DRIVE
City-St-Zip: SAINT AUGUSTINE, FL 32080

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: M. KATINA TAYLOR

DVS

01/22/2008

Electronic Signature of Signing Officer or Director

Date