

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P95000057917

Entity Name: GCE SERVICES, INC.

**FILED**  
**Feb 10, 2011**  
**Secretary of State**

## **Current Principal Place of Business:**

819 SW 44TH ST  
STE D  
CAPE CORAL, FL 33914 US

## **New Principal Place of Business:**

## **Current Mailing Address:**

PO BOX 150052  
D  
CAPE CORAL, FL 33915

## **New Mailing Address:**

PO BOX 150052  
CAPE CORAL, FL 33915

FEI Number: 65-0595477

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## **Name and Address of Current Registered Agent:**

EADS, W. CAROLYN  
1821 PICCADILLY CIRCEL  
CAPE CORAL, FL 33991 US

## **Name and Address of New Registered Agent:**

EADS, W. CAROLYN  
1821 PICCADILLY CIRCLE  
CAPE CORAL, FL 33991 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:

02/10/2011

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

Title: PRES  
Name: EADS, W. CAROLYN  
Address: 1821 PICCADILLY CIRCLE  
City-St-Zip: CAPE CORAL, FL 33991

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: W. CAROLYN EADS

PRES

02/10/2011

Electronic Signature of Signing Officer or Director

Date