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PROFIT CORPORATION ANNUAL REPORT

Corporation Name



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996 P95000060698 (4) **DOCUMENT #**

GUMBALLS & MORE, INC.



2004 ADIRONDACK CIRCLE MELBOUNE FL 32935		2004 ADIRONDACK MELBOUNE FL 329			
				 Date Incorporated or Qualified 08/07/1995 	3a. Date of Last Report
. Principal Place	e of Business	2a. Mailing Address	•	4. FEI Number 22201.0	Applied For
<u> </u>		26		1 54-32/101	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		Election Campaign Financing Trust Fund Contribution	S5.00 May Be Added to Fees
Z _i p	Country 25	Ζφ 29	Country 30	8. This corporation has liability for Florida Statutes Yes	
l	9. Name and Address of Curr			10. Name and Address of New R	legistered Agent
	., E.i		81 Name		
POGUE,			82 Street Add	Iress (P.O. Box Number is Not Acceptat	olie)
2004 ADIRONDACK CIRCLE MELBOUNE FL 32935			83		
MELLOCO	AL IL GESON		84 City		FL 85 Zip Code
				oration submits this statement for the pu ard of directors. I hereby accept the app	ruges of changing its registered of
SIGNATURE SI	ignature, typed or printed numer of regularical a	ga La el De ir applicable	MOTE Registered April 18 gration region	od stan remtatogi	[IA]?
2.	OFFICERS A	AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFF	
	PD	AND DIRECTORS DELETE	1.1101.6	ADDITIONS/CHANGES TO OFF	CERS AND DIRECTORS IN 12 Change Additio
TLE	PD Pogue, Brian K	DELFTE	1 1 TITLE 12 NAME	ADDITIONS/CHANGES TO OFF	
TLE AME TREET AODRESS	PD POGUE, BRIAN K 2004 ADIRONDACK CIRC	DELFTE	1 1 TIBLE 12 NAME 13 STREET ADDRESS	ADDITIONS/CHANGES TO OFF	
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2. TITLE AME TREET ADDRESS STY-ST-ZIP TITLE	PD POGUE, BRIAN K 2004 ADIRONDACK CIRC MELBOUNE FL 32935 SD POWERS, KEVIN A 2755 COZUMEL DRIVE, 4	DELETE DELETE DELETE	1 1 TITLE 12 NAME 13 STRELL ADDRESS 14 C-TY-ST-ZF 2 1 TITLE 22 NAME 23 STREEL ADDRESS 24 CHY-ST-ZIF 3 1 TITLE 32 NAME 33 STREEL ADDRESS 34 CHY-ST-ZIF 4 1 TITLE 42 NAME 43 STREEL ADDRESS 44 CHY-ST-ZIF 5 1 TITLE 52 NAME 53 STREEL ADDRESS	ADDITIONS/CHANGES TO OFF	Change Addition Change Addition Change Addition Change Addition Change Addition
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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under early that I am an officer or director of the conjugation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.