

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000004988

Entity Name: G & L VENDING, INC.

FILED
May 29, 2009
Secretary of State

Current Principal Place of Business:

3450 N.E. JACKSONVILLE ROAD
OCALA, FL 34479

New Principal Place of Business:

Current Mailing Address:

3450 N.E. JACKSONVILLE ROAD
OCALA, FL 34479

New Mailing Address:

FEI Number: 59-3362080

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GRIFFIN, LARRY
3450 N.E. JACKSONVILLE ROAD
OCALA, FL 34479 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: GRIFFIN, LARRY
Address: 6050 SW 18TH CT RD
City-St-Zip: OCALA, FL

Title: VP () Delete
Name: GRIFFIN, RAY
Address: 605A0 SW 8TH CT RD
City-St-Zip: OCALA, FL

Title: VP () Delete
Name: GRIFFIN, ROBERT
Address: 6050 SW 18TH CT RD
City-St-Zip: OCALA, FL

Title: VP () Delete
Name: GRIFFIN, RYAN
Address: 6050 SW 18TH CT RD
City-St-Zip: OCALA, FL

Title: VP () Delete
Name: GRIFFIN, RADLEY
Address: 6050 SW 18TH CT RD
City-St-Zip: OCALA, FL

Title: ST () Delete
Name: GRIFFIN, SONYA
Address: 6050 SW 18TH CT RD
City-St-Zip: OCALA, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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: LARRY GRIFFIN

PRES

05/29/2009

Electronic Signature of Signing Officer or Director

Date