

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000047611

Entity Name: GAFCOMP, INC.

FILED
Apr 19, 2009
Secretary of State

Current Principal Place of Business:

3036 ANDROS PLACE
ORLANDO, FL 32827

New Principal Place of Business:

Current Mailing Address:

3036 ANDROS PLACE
ORLANDO, FL 32827

New Mailing Address:

FEI Number: 58-2245269

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LINCOLN, FLOWERS D PRES
3036 ANDROS PLACE
ORLANDO, FL 32827 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: FLOWERS, LINCOLN
Address: 3036 ANDROS PLACE
City-St-Zip: ORLANDO, FL 328275162

Title: VP () Delete
Name: FLOWERS, ADELETT
Address: 3036 ANDROS PLACE
City-St-Zip: ORLANDO, FL 32827

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: LINCOLN D. FLOWERS

PRES

04/19/2009

Electronic Signature of Signing Officer or Director

Date