

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 06, 2005 8:00 am
Secretary of State

04-06-2005 90128 050 ***150.00

DOCUMENT # P98000083411 1. Entity Name GXS CORPORATION	
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Principal Place of Business 6260 N.W. 18TH STREET MARGATE, FL 33060	Mailing Address 6260 N.W. 18TH STREET MARGATE, FL 33060
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50034374



03282005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0868176	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent STANTON, GORDON F 6260 N.W. 18TH STREET POMPANO BEACH, FL 33060	DO NOT WRITE IN THIS SPACE
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>	(NOTE: Registered Agent signature required when reinstating)	DATE _____
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FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing PA Check <input type="checkbox"/> \$5.00 May Be Added to Fees Trust Fund Contribution <input type="checkbox"/>	FOR RETURN TO THE SECRETARY OF STATE: IF YOU ARE CHANGING YOUR REGISTERED OFFICE OR AGENT, CHECK HERE. IF YOU ARE CHANGING YOUR REGISTERED AGENT, CHECK HERE. IF YOU ARE CHANGING YOUR REGISTERED OFFICE, CHECK HERE. IF YOU ARE CHANGING YOUR REGISTERED AGENT AND OFFICE, CHECK HERE.
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D STANTON, GORDON F 6260 N.W. 18TH STREET MARGATE, FL 33060
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed; or on an attachment with an address, with all other like empowered.

SIGNATURE: <u>Gordon F. Stanton</u>	Date <u>4/3/05</u>	Daytime Phone # _____
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		