

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P98000085084

Entity Name: G.M.A.,INC.

**FILED**  
**Mar 17, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

215 SOUTH MONROE ST  
SUITE 306  
TALLAHASSEE, FL 32301

**New Principal Place of Business:**

**Current Mailing Address:**

215 SOUTH MONROE ST  
SUITE 306  
TALLAHASSEE, FL 32301

**New Mailing Address:**

FEI Number: 59-3509849

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

ROBERTS, ADAM J  
215 SOUTH MONROE ST  
SUITE 306  
TALLAHASSEE, FL 32301 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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: MCGEE, WALLACE G JR.  
Address: 215 SOUTH MONROE STREET SUITE 306  
City-St-Zip: TALLAHASSEE, FL 32301

Title: D  
Name: MCGEE, TANYA  
Address: 3810 N. PINE VALLEY LOOP  
City-St-Zip: LECANTO, FL 34461

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: WALLACE GENE MCGEE, JR.

PRES

03/17/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date