

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

07 JUL 30 PM 8:39

DOCUMENT # S63494

1. Entity Name
GREAT AMERICAN VENDING, INCORPORATED



Principal Place of Business
3421 ENTERPRISE WAY
MIRAMAR, FL 33025

Mailing Address
5 CAMPANELLI CIRCLE
SUITE 200
CANTON, MA 02021

2. Principal Place of Business - No P.O. Box #
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

City & State
City & State

Zip
Country



07272007 Chg-P CR2E034 (12/06)

4. FEI Number
65-0275642

Applied For
Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City
FL Zip Code

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 *Deborah D. Skipper* Deborah D. Skipper 7/30/07
Signature, typed or printed name of registered agent and date if applicable. (NOTE: Registered agent must sign when reinstating) DATE

FILE NOW!!! FEE IS \$550.00
Due by September 14, 2007

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

700107466457
07/07/07--01054--020 **\$550.00

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE CEOD Delete
NAME HOTCHIN, JOHN
STREET ADDRESS 5 CAMPANELLI CIRCLE, STE. 200
CITY-ST-ZIP CANTON, MA 02021

TITLE Acting CEO/President Change Addition
NAME Shawn Martin
STREET ADDRESS 5 Campmell: Circle - Suite 200
CITY-ST-ZIP Canton, MA 02021

TITLE PD Delete
NAME BRUNO, MARK A
STREET ADDRESS 5 CAMPANELLI CIRCLE, STE. 200
CITY-ST-ZIP CANTON, MA 02021

TITLE Chief Operating Officer Change Addition
NAME Brian Bruno
STREET ADDRESS 5 Campmell: Circle - Suite 200
CITY-ST-ZIP Canton, MA 02021

TITLE CFO Delete
NAME GLASS, WILLIAM J
STREET ADDRESS 5 CAMPANELLI CIRCLE, STE. 200
CITY-ST-ZIP CANTON, MA 02021

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP
700107466457
08/07/07--01054--021 **\$8.75

TITLE S Delete
NAME TRUSLOW, JAMES L
STREET ADDRESS 5 CAMPANELLI CIRCLE, STE. 200
CITY-ST-ZIP CANTON, MA 02021

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D Delete
NAME DENNY III, GEORGE P
STREET ADDRESS 500 BOYLSTON STREET, STE. 1880
CITY-ST-ZIP BOSTON, MA 02116

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D Delete
NAME DENNY, JOHN
STREET ADDRESS 500 BOYLSTON STREET, STE. 1880
CITY-ST-ZIP BOSTON, MA 02116

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: *J. Smith* Secretary 7/27/07 (78) 828-2345 x 142
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #