## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# V45064

Entity Name: L.D. GIBSON, INC.

FILED Apr 30, 2007 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 1616 20TH STREET SW 1616 20TH STREET SW US VERO BEACH, FL 32962 VERO BEACH, FL 32962 **Current Mailing Address: New Mailing Address:** 1616 20TH STREET SW 1616 20TH STREET SW VERO BEACH, FL 32962 VERO BEACH, FL 32962 US FEI Number: 65-0346718 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: GIBSON, LAURENCE D. 1616 20TH ST., SW VERO BEACH, FL 32962 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: (X) Change ( ) Addition GIBSON, LAURENCE D., Name: Name: GIBSON, LAURENCE D., 1616 20 TH ST., SW 1616 20 TH ST., SW Address: Address: City-St-Zip: VERO BEACH, FL 32962 City-St-Zip: VERO BEACH, FL 32962 US Title: Title: ( ) Delete (X) Change ( ) Addition GIBSON, LAURENCE D., Name: Name: GIBSON, LAURENCE D., 1616 20 TH ST., SW 1616 20 TH ST., SW Address: Address: VERO BEACH, FL 32962 VERO BEACH, FL 32962 US City-St-Zip: City-St-Zip: ( ) Delete Title: (X) Change ( ) Addition DV Title: DV GIBSON, JUDY K., GIBSON, JUDY K., Name: Name: 1616 20 TH ST., SW 1616 20 TH ST., SW Address: Address: City-St-Zip: VERO BEACH, FL 32962 City-St-Zip: VERO BEACH, FL 32962 US Title: (X) Delete Title: () Change () Addition GIBSON, BENJAMIN J., Name: Name: Address: 1995 19TH AVE. SW Address: City-St-Zip: VERO BEACH, FL 32962 City-St-Zip: Title: Title: (X) Delete () Change () Addition Name: GLAS, JOHN Name: 2026 19TH AVE. SW Address: Address: City-St-Zip: VERO BEACH, FL 32962 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: LAURENCE D. GIBSON PRES 04/30/2007