

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000001379

FILED  
Mar 23, 2009  
Secretary of State

Entity Name: GANDER & WHITE SHIPPING INC.

**Current Principal Place of Business:**

21-44 44TH ROAD  
LONG ISLAND CITY, NY 11101

**New Principal Place of Business:**

**Current Mailing Address:**

21-44 44TH ROAD  
LONG ISLAND CITY, NY 11101

**New Mailing Address:**

FEI Number: 13-3318616      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

INCORPORATING SERVICES, LTD  
1540 GLENWAY DRIVE  
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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: CP      ( ) Delete  
Name: WHITE, PATRICK  
Address: 21-44 44TH ROAD  
City-St-Zip: LONG ISLAND CITY, NY 11101

Title: D      ( ) Delete  
Name: JAQUE, MICHAEL  
Address: 21-44 44TH ROAD  
City-St-Zip: LONG ISLAND CITY, NY 11101

Title: DS      ( ) Delete  
Name: CANNON, PAUL  
Address: 21-44 44TH ROAD  
City-St-Zip: LONG ISLAND CITY, NY 11101

Title: D      ( ) Delete  
Name: HOWELL, OLIVER  
Address: 21-44 44TH ROAD  
City-St-Zip: LONG ISLAND CITY, NY 11101

Title: D      ( ) Delete  
Name: LAKE, IAIN  
Address: 21-44 44TH ROAD  
City-St-Zip: LONG ISLAND CITY, NY 11101

Title: D      ( ) Delete  
Name: PETIT, FRANCIS  
Address: 21-44 44TH ROAD  
City-St-Zip: LONG ISLAND CITY, NY 11101

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: IAIN LAKE

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

DIR

03/23/2009

\_\_\_\_\_ Date