2006 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # P03000055676

1. Entity Name

GULF BREEZE RESORTS, INC.



FILED

06 MAY 11 23 3: 18

SECRUTA TALLAHA FOT, ORIBA

Principal Place of Business 3015 N OCEAN BOULEVA

3015 N.OCEAN BOULEVARD SUITE 121

FORT LAUDERDALE, FL 33308

Mailing Address

3015 N.OCEAN BOULEVARD SUITE 121

FORT LAUDERDALE, FL 33308



04272006

No Chg-P

CR2E034 (11/05)

4. FEI Number 72-1566648

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

FOSTER, REBECCA A 3015 N OCEAN BLVD. STE. 121 FORT LAUDERDALE, FL 33308

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	named entity submits this statement for the plions of registered agent.	ourpose of changing its register	ed office or i	registered agent, or bo	oth, in the State of Florida. I am familiar with, and accept	
SIGNATURE.	Signature, typed or printed name of registered agent and title	if applicable. (NOTE: Registere	d Agent signatur	e required when reinstating)	DATE	
		Election Campaign Final Trust Fund Contribution.		\$5.00 May Be Added to Fees		
10.	OFFICERS AND DIREC	CTORS				
TITLE NAME STREET ADORESS CITY-ST-ZIP	DPS FOSTER, REBECCA A 3015 N.OCEAN BOULEVARD SUITE FORT LAUDERDALE, FL 33308	121				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVT LANDAU, MARC J 3015 N.OCEAN BOULEVARD SUITE 121 FORT LAUDERDALE, FL 33308			700076202587 05/14/0601036004 **5495.00		
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN	THIS SPACE	
THILE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME						

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ter 4/27/06 954,563,2444