2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000103418

Entity Name: GULFSTAR SERVICES INC.

FILED Apr 24, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

10680 STRIKE LANE BONITA SPRINGS, FL 34135

BON 17 (OF 100 OF 100 OF 100

Current Mailing Address: New Mailing Address:

10680 STRIKE LANE BONITA SPRINGS, FL 34135

FEI Number: 20-1345943 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:

US REGISTERED AGENT, INC.

1415 PANTHER LANE

SUITE 121

NAPLES, FL 34109 US

FOWLER WHITE BOGGS BANKER P.A.

5811 PELICAN BAY BLVD.

SUITE 600

NAPLES, FL 34108 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: AARON A. FARMER 04/24/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: DPT (X) Change () Addition

 Name:
 PANAS, MATTHEW
 Name:
 PANAS, MATTHEW

 Address:
 321 ROBIN HOOD CIRCLE, #203
 Address:
 321 ROBIN HOOD CIRCLE, #203

City-St-Zip: NAPLES, FL 34104 City-St-Zip: NAPLES, FL 34104

Title: D () Delete Title: DVPS (X) Change () Addition Name: WILSON, CHRISTOPHER L Name: WILSON, CHRISTOPHER L

Address: 10680 STRIKE LANE
City-St-Zip: BONITA SPRINGS, FL 34135

Name: Witson, Christoffick L
Address: 10680 STRIKE LANE
City-St-Zip: BONITA SPRINGS, FL 34135

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MATTHEW PANAS P 04/24/2005