

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000019892

FILED
Jan 06, 2011
Secretary of State

Entity Name: GULFSHORE RISK SOLUTIONS, INC.

Current Principal Place of Business:

4100 GOODLETTE ROAD NORTH
NAPLES, FL 34103

New Principal Place of Business:

Current Mailing Address:

4100 GOODLETTE ROAD NORTH
NAPLES, FL 34103

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HAVEMEIER, BRAD
4100 GOODLETTE ROAD NORTH
SUITE 100
NAPLES, FL 34103 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

OFFICERS AND DIRECTORS:

Title: P
Name: HAVEMEIER, BRAD
Address: 4100 GOODLETTE RD N STE 100
City-St-Zip: NAPLES, FL 34103

Title: VP
Name: HAVEMEIER, GREG
Address: 4100 GOODLETTE RD N STE 100
City-St-Zip: NAPLES, FL 34103

Title: VP
Name: GLEESON, MICHELLE
Address: 4100 GOODLETTE RD N STE 100
City-St-Zip: NAPLES, FL 34103

I hereby 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 all other like empowered.

SIGNATURE: BRAD HAVEMEIER

P

01/06/2011

Electronic Signature of Signing Officer or Director

Date