

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000019039

FILED
Feb 24, 2004
Secretary of State

Entity Name: GULF COAST SPA MANUFACTURERS, INC.

Current Principal Place of Business:

11620 54TH ST NORTH
CLEARWATER, FL 33760

New Principal Place of Business:

Current Mailing Address:

11620 54TH ST NORTH
CLEARWATER, FL 33760

New Mailing Address:

FEI Number: 65-0905520 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TATUM, BRADFORD T
11620 54TH ST NORTH
CLEARWATER, FL 33760

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: PCE () Delete
Name: TATUM, BRADFORD T
Address: 8094 COTTONWOOD CT
City-St-Zip: SEMINOLE, FL 33776

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP () Change (X) Addition
Name: HEMBY, NICKI
Address: 5531 110TH AVENUE NORTH
City-St-Zip: PINELLAS PARK, FL 33782

Title: TRES () Change (X) Addition
Name: GOLDSMITH, BRIAN
Address: 2584 SPLITWOOD WAY
City-St-Zip: CLEARWATER, FL 33761

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: BRIAN GOLDSMITH

TRES

02/24/2004

_____ Electronic Signature of Signing Officer or Director

_____ Date