

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 21, 1999 8:00 am
Secretary of State

04-21-1999 90140 020 ***158.75

DOCUMENT # P97000024722

1. Corporation Name

GULF BAY CONSTRUCTION, INC.



Principal Place of Business

Mailing Address

801 EL OAK DRIVE
#710
NAPLES FL 34108
US

801 EL OAK DRIVE
#710
NAPLES FL 34108
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/14/1997

4. FEI Number

59-3437502

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

☒

Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HAYES, JOHN A
4001 NORTH TAMiami TRAIL
SUITE 350
NAPLES FL 34103

81 Name
Joseph L Parisi

82 Street Address (P.O. Box Number is Not Acceptable)
4001 Tamiami Trail North

83 Suite 350

84 City
Naples

FL

85 Zip Code
34103

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Joseph L Parisi

04/12/99

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D ☐ DELETE
NAME DINARDO, ANTHONY
STREET ADDRESS 4001 N TAMiami TRAIL, SUITE 350
CITY-ST-ZIP NAPLES FL 34103

1.1 TITLE D ☐ Change ☒ Addition
1.2 NAME Frederick Vandercook
1.3 STREET ADDRESS 4001 Tamiami Trail North, Ste 350
1.4 CITY-ST-ZIP Naples, FL 34103

TITLE D ☐ DELETE
NAME WOODWARD, MARK J
STREET ADDRESS 801 LAUREL OAK DRIVE #710
CITY-ST-ZIP NAPLES FL 34108

2.1 TITLE D ☐ Change ☒ Addition
2.2 NAME Bill R Ford
2.3 STREET ADDRESS 4001 Tamiami Trail North, Suite 350
2.4 CITY-ST-ZIP Naples, FL 34103

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 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

04/12/99

Date

941 434 2030

Daytime Phone *

Anthony Dinardo

CR2E034 (11/98)

068117