

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000125582

**FILED**  
**Apr 29, 2007**  
**Secretary of State**

**Entity Name:** GEMINI WEST COAST INVESTIGATIONS, INC.

**Current Principal Place of Business:**

8466 NO. LOCKWOOD RIDGE RD. #191  
SARASOTA, FL 34243

**New Principal Place of Business:**

**Current Mailing Address:**

8466 NO. LOCKWOOD RIDGE RD. #191  
SARASOTA, FL 34243

**New Mailing Address:**

FEI Number: 20-5677810

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SWANEY, NATALIE  
5777 BENEVA RD. SOUTH  
SARASOTA, FL 34233 US

**Name and Address of New Registered Agent:**

ALFONSO, SUZETTE  
707 DEL WEBB BLVD  
SUN CITY CENTER, FL 33573 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: SUZETTE ALFONSO

04/29/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: MOYER, M. SUE  
Address: 5795 AVISTA DR.  
City-St-Zip: SARASOTA, FL 34243

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: M SUE MOYER

PRES

04/29/2007

Electronic Signature of Signing Officer or Director

Date