

**2014 FLORIDA PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P10000082651

**Entity Name:** GULFSANDS OF SOUTHWEST FLORIDA, INC.

**Current Principal Place of Business:**

510 24TH AVENUE NE  
NAPLES, FL 34120

**FILED**  
**Apr 22, 2014**  
**Secretary of State**  
**CC5565496480**

**Current Mailing Address:**

510 24TH AVENUE NE  
NAPLES, FL 34120 US

**FEI Number: 27-3798910**

**Certificate of Status Desired: No**

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

JOHNSON, HENRY PESQ.  
6640 WILLOW PARK DRIVE  
SUITE A  
NAPLES, FL 34109 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title P  
Name BAKER, RICHARD  
Address 510 24TH AVENUE NE  
City-State-Zip: NAPLES FL 34120

Title VP  
Name BAKER, JEAN  
Address 510 24TH AVENUE NE  
City-State-Zip: NAPLES FL 34120

Title S  
Name BAKER, JEAN  
Address 510 24TH AVENUE NE  
City-State-Zip: NAPLES FL 34120

Title T  
Name BAKER, RICHARD  
Address 510 24TH AVENUE NE  
City-State-Zip: NAPLES FL 34120

Title D  
Name BAKER, JEAN  
Address 510 24TH AVENUE NE  
City-State-Zip: NAPLES FL 34120

Title D  
Name BAKER, RICHARD  
Address 510 24TH AVENUE NE  
City-State-Zip: NAPLES FL 34120

*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: RICHARD E. BAKER**

**PRESIDENT**

**04/22/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date