2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 29, 2005
Secretary of State

DOCUMENT# 177063

Entity Name: GULF EXHIBITION CORP.

Current Principal Place of Business:

1010 MIRACLE STRIP PKWY. S.E.
FORT WALTON BCH., FL 32548

New Principal Place of Business:

Current Mailing Address:

1010 MIRACLE STRIP PKWY. S.E.
FORT WALTON BCH., FL 32548

New Mailing Address:

FEI Number: 59-0728460 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

MERRILL, W III
3541 SWAN LANE
PENSACOLA, FL 32504 US

Name and Address of New Registered Agent:

MERRILL, W III
P.O. BOX 710
PENSACOLA, FL 32593 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: _____ 06/29/2005
Electronic Signature of Registered Agent — Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title:	VD	( ) Delete
Name:	DICKERSON, F.O.,	
Address:	402 W. LLOYD STREET	
City-St-Zip:	PENSACOLA, FL	
Title:	D	( ) Delete
Name:	POWELL, S,	
Address:	39 LINWOOD RD.	
City-St-Zip:	FT WALTON BCH., FL	
Title:	PD	( ) Delete
Name:	MERRILL,III, W.,	
Address:	3541 SWAN LANE	
City-St-Zip:	PENSACOLA, FL	
Title:	VD	( ) Delete
Name:	SIEBANALER, J.G.	
Address:	59 YACHT CLUB DRIVE N.E.	
City-St-Zip:	FT.WALTON BCH., FL 32548	
Title:	STD	( ) Delete
Name:	ABRAMS, D.W. II	
Address:	2095 ALFRED BLVD	
City-St-Zip:	NAVARRE, FL 32566	
Title:	D	( ) Delete
Name:	POWELL, RICHARD W	
Address:	PO BOX 2167	
City-St-Zip:	FT WALTON BEACH, FL 32549	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	D	(X) Change ( ) Addition
Name:	POWELL, S,	
Address:	39 LINWOOD RD.	
City-St-Zip:	FT WALTON BCH., FL 32547	
Title:	PD	(X) Change ( ) Addition
Name:	MERRILL,III, W.,	
Address:	P.O. BOX 710	
City-St-Zip:	PENSACOLA, FL 32593	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		

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: DONALD W. ABRAMS, II STD 06/29/2005
Electronic Signature of Signing Officer or Director — Date