

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 205274

FILED
Jan 06, 2009
Secretary of State

Entity Name: GULF COAST CHEMICAL CORPORATION

Current Principal Place of Business:

101 WAYNE PLACE
TAMPA, FL 33619

New Principal Place of Business:

Current Mailing Address:

101 WAYNE PLACE
TAMPA, FL 33619

New Mailing Address:

FEI Number: 59-0816065

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WALTER, FREDERICK G.
903 OAK HOLLOW
BRANDON, FL 33510 US

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: C () Delete
Name: WALTER, FREDERICK G
Address: 903 OAK HOLLOW PLACE
City-St-Zip: BRANDON, FL 33510

Title: P () Delete
Name: ALLEN, DARYL A
Address: 3092 OSPREY LANE
City-St-Zip: CLEARWATER, FL 34622

Title: VS () Delete
Name: WALTER, KEITH G
Address: 12355 94TH AVENUE NORTH
City-St-Zip: SEMINOLE, FL 33708

Title: VT () Delete
Name: WALTER, KARL F
Address: 5826 TERNCREST DRIVE
City-St-Zip: LITHIA, FL 33547

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: VS (X) Change () Addition
Name: WALTER, KEITH G
Address: 12965 HIBISCUS AVENUE
City-St-Zip: SEMINOLE, FL 33776

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: KARL F. WALTER

VT

01/06/2009

Electronic Signature of Signing Officer or Director

Date