


# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 12, 2007 8:00 am**  
**Secretary of State**

03-12-2007 90369 021 \*\*\*150.00

<b>DOCUMENT # 238302</b> 1. Entity Name <b>GULF BREEZE REALTY, INCORPORATED.</b>					
Principal Place of Business <b>810 GULF BREEZE PARKWAY</b> <b>GULF BREEZE, FL 32561 US</b>			Mailing Address <b>810 GULF BREEZE PARKWAY</b> <b>GULF BREEZE, FL 32561 US</b>		
2. Principal Place of Business - No P.O. Box # <b>3311 Gulf Breeze Pkwy</b>		3. Mailing Address <b>P.O. Box 716</b>			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State <b>Gulf Breeze, FL</b>		City & State <b>Gulf Breeze, FL</b>		4. FEI Number <b>59-0945923</b>	
Zip <b>32563</b>		Country <b>U.S.A.</b>		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
Zip <b>32562</b>		Country <b>U.S.A.</b>		Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent  <b>LIVELY, JAMES L JR</b> <b>810 GULF BREEZE PARKWAY</b> <b>GULF BREEZE, FL 32561</b>			7. Name and Address of New Registered Agent Name <b>LIVELY, JAMES L JR</b> Street Address (P.O. Box Number is Not Acceptable) <b>3311 Gulf Breeze Pkwy</b> City <b>Gulf Breeze</b> <b>FL</b> Zip Code <b>32563</b>		
8. The above named entity submits this statement for the purpose of changing its registered office, registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. <div style="display: flex; justify-content: space-between; align-items: center;"> <div style="width: 60%;">           SIGNATURE <i>James L. Lively, Jr. President/Director</i>  <b>James L. Lively, Jr. President/Director</b> </div> <div style="width: 35%; text-align: right;"> <b>3/6/2007</b>  <small>DATE</small> </div> </div>					
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2007 Fee will be \$550.00</b>			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD <b>LIVELY, JAMES L JR</b> <b>810 GULF BREEZE PARKWAY</b> <b>GULF BREEZE, FL 32561</b>	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD <b>LIVELY, JAMES L JR</b> <b>3311 Gulf Breeze Pkwy</b> <b>Gulf Breeze, FL 32563</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DVST <b>LIVELY, BETTY J</b> <b>810 GULF BREEZE PARKWAY</b> <b>GULF BREEZE, FL 32561</b>	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	DVST <b>LIVELY, BETTY J</b> <b>3311 Gulf Breeze Pkwy</b> <b>Gulf Breeze, FL 32563</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE <i>James L. Lively, Jr. President/Director</i> <b>James L. Lively, Jr. President/Director</b>			<b>3/6/2007</b> <b>(850)932-2237</b> <small>Date Daytime Phone #</small>		