

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 307585

FILED  
Feb 09, 2007  
Secretary of State

Entity Name: GULF COAST ELECTRIC, INC.

## Current Principal Place of Business:

10661 HABITAT TRAIL  
BOKEELIA, FL 33922 US

## New Principal Place of Business:

5562 BAY POINT RD.  
BOKEELIA, FL 33922 US

## Current Mailing Address:

P.O. BOX 336  
PINELAND, FL 33945 US

## New Mailing Address:

FEI Number: 59-1170390      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SLAGLE, THOMAS E  
10661 HABITAT TRAIL  
BOKEELIA, FL 33922 US

## Name and Address of New Registered Agent:

SLAGLE, THOMAS E PRES  
5562 BAY POINT RD.  
BOKEELIA, FL 33922 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: THOMAS E. SLAGLE

02/09/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: SLAGLE, THOMAS,  
Address: 10661 HABITAT TRAIL  
City-St-Zip: BOKEELIA, FL 33922

Title: DV ( ) Delete  
Name: HOBBY, GERALD,  
Address: 18260 MATT RD  
City-St-Zip: NORTH FORT MYERS, FL 33903

Title: ASD ( ) Delete  
Name: NEELD, JR., ROBERT M, .  
Address: 1426 SE 44TH ST  
City-St-Zip: CAPE CORAL, FL 33904

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: SLAGLE, THOMAS E PRES  
Address: 5562 BAY POINT RD.  
City-St-Zip: BOKEELIA, FL 33922

Title: DV (X) Change ( ) Addition  
Name: HOBBY, GERALD VP  
Address: 18260 MATT RD  
City-St-Zip: NORTH FORT MYERS, FL 33903

Title: ASD (X) Change ( ) Addition  
Name: NEELD, JR., ROBERT M ASD  
Address: 1426 SE 44TH ST  
City-St-Zip: CAPE CORAL, FL 33904

I hereby certify that the information supplied with this filing does not qualify for the 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: THOMAS E. SLAGLE

PRES

02/09/2007

Electronic Signature of Signing Officer or Director

Date