

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 394623

FILED  
Feb 09, 2011  
Secretary of State

**Entity Name:** GULF-ATLANTIC CONSTRUCTORS, INC.

**Current Principal Place of Business:**

650 WEST OAKFIELD ROAD  
P. O. BOX 6086  
PENSACOLA, FL 32503

**New Principal Place of Business:**

650 WEST OAKFIELD ROAD  
PENSACOLA, FL 32503

**Current Mailing Address:**

650 WEST OAKFIELD ROAD  
P. O. BOX 6086  
PENSACOLA, FL 32503

**New Mailing Address:**

650 WEST OAKFIELD ROAD  
PENSACOLA, FL 32503

**FEI Number:** 59-1426633

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CADDELL, PAMELA H.  
650 OAKFIELD ROAD  
PENSACOLA, FL 32503 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

**OFFICERS AND DIRECTORS:**

Title: ST  
Name: BAUER, BYRON D  
Address: 7931 CASTLE POINTE WAY  
City-St-Zip: PENSACOLA, FL 32506 83

Title: PRES  
Name: CADDELL, PAMELA H.  
Address: 2538 ANGEL COURT  
City-St-Zip: GULF BREEZE, FL 32563

Title: VP  
Name: HUNT, WILLIAM A  
Address: 110 HIGHPOINT ST.  
City-St-Zip: GULF BREEZE, FL 32561

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: PAMELA CADDELL

PRES

02/09/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date