

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 520742

FILED
Apr 12, 2007
Secretary of State

Entity Name: GULF COAST TESTING LABORATORY, INC.

Current Principal Place of Business:

5745 PARK BLVD (33781)
PO BOX 6
PINELLAS PARK, FL 33780

New Principal Place of Business:

5745 PARK BLVD (33781)
PINELLAS PARK, FL 33780

Current Mailing Address:

5745 PARK BLVD (33781)
PO BOX 6
PINELLAS PARK, FL 33780

New Mailing Address:

FEI Number: 59-1711480 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

DAVIS, RICK L
5745 PARK BLVD
PINELLAS PARK, FL 33781 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: D () Delete
Name: HUNT, TIMOTHY L
Address: 568 BAYWOOD DR N.
City-St-Zip: DUNEDIN, FL 34698

Title: PD () Delete
Name: DAVIS, RICK L
Address: 5745 PARK BLVD
City-St-Zip: PINELLAS PARK, FL 33781

Title: VPD () Delete
Name: FITZGERALD, BARRY W
Address: 2159 4TH AVE N.
City-St-Zip: SAINT PETERSBURG, FL 33713

Title: T () Delete
Name: DAVIS, JULIANNE
Address: 8069 81ST WAY
City-St-Zip: SEMINOLE, FL 33777

Title: S (X) Delete
Name: FITZGERALD, JULIE M
Address: 2159 4TH AVE N.
City-St-Zip: SAINT PETERSBURG, FL 33713

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: GOEL, RAM A DR
Address: 16306 DOUNE COURT
City-St-Zip: TAMPA, FL 33647

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

Title: D (X) Change () Addition
Name: GALVEZ, ANTHONY
Address: 204 S WARD STREET
City-St-Zip: TAMPA, FL 33609

Title: ST (X) Change () Addition
Name: DAVIS, JULIANNE
Address: 8069 81ST WAY
City-St-Zip: SEMINOLE, FL 33777

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 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: RICK L DAVIS

PD

04/12/2007

Electronic Signature of Signing Officer or Director

Date