2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED May 01, 2006 8:00 am Secretary of State

DOCUMENT	# 592761	
DOCOMENT	# 332101	

05-01-2006 90360 045 ***158.75 1. Entity Name **GULF COAST SYSTEM DESIGN COMPANY** Principal Place of Business Mailing Address 2025 CATTLEMEN RD 2025 CATTLEMEN RD UNIT A UNIT A SARASOTA, FL 34232 SARASOTA, FL 34232 115 2. Principal Place of Business 1940 Northgate Blvd. 3. Mailing Address 1940 Northgate Blvd. Suite, Apt. #, etc. Suite, Apt. #, etc. 04212006 CR2E034 (11/05) Chg-P B-6 B-6 Applied For City & State City & State 4. FEI Number Sarasota, Fl Sarasota, Fl 59-1871085 Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired 34234 34234 Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Lindsay, David G.B. DAVID G. B. LINDSAY Street Address (P.O. Box Number is Not Acceptable)
1940 Northgate Blvd., Ste 2025 CATTLEMEN ROAD UNIT A SARASOTA, FL 34232 City Zip Code 34234 Sarasota. 8. 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. I am familiar with, and accept the obligations oftregistered agent. David Lindsay, President 04/21/06 SIGNATURE. registered agent and title il applicable (NOTE Registered Agent signatule required when reinstating) 9. Election Campaign Financing **\$5.00** May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. 11. SD TITLE SD Lindsay, Priscilla L. 1940 Northgate Blvd., Ste. B-6 ☐ Delete TITLE Addition LINDSAY, PRISCILLA L. NAME MARKE 2025 CATTLEMEN RD, UNIT A STREET ADDRESS STREET ADDRESS SARASOTA, FL CITY-ST-ZIP 00000, CITY-ST-ZIP Sarasota, Fl 34234 THLE Delete THE X) Change ☐ Addition PD LINDSAY, DAVID G. B. NAME Lindsay, David G.B. 1940 Northgate Blvd., Ste. B-6 2025 CATTLEMEN RD, UNIT A STREET ADDRESS STREET ADDRESS SARASOTA, FL CITY-S1-ZIP CITY-ST-ZIP Sarasota, Fl 34234 ☐ Change Delete TITLE ☐ Addition HALAF NAME STREET ADDRESS STREET ADDRESS CHY ST ZIP CITY ST ZIP ☐ Delete Hite ☐ Change Addition DITTE NAME NAME STREET ADDRESS STREET ADDRESS City-St-ZIP CHY-ST-ZIP Delete TITLE Change ☐ Addition NAME NAME STREET ATIONESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Defete TITLE Change 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 a raddress, with all other like empowered.

CITY-ST-ZIP

NAME STREET ADDRESS

SIGNATURE:

NAME

STREET ADORESS

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

David Lindsay

President

04/21/06 Date

941/358-6020

Daytme Phone #