

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 646454

Entity Name: PEN GULF, INC.

FILED
Jan 03, 2008
Secretary of State

Current Principal Place of Business:

1402 W. ZARRAGOSSA STREET
PENSACOLA, FL 32501

New Principal Place of Business:

Current Mailing Address:

1402 W. ZARRAGOSSA STREET
P.O. BOX 12916
PENSACOLA, FL 32591

New Mailing Address:

FEI Number: 59-1953552

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COX, NANCY R.
1402 ZARRAGOSSA STREET
PENSACOLA, FL 32501 US

Name and Address of New Registered Agent:

COX, NANCY R.
1402 ZARRAGOSSA STREET
PENSACOLA, FL 32501 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:

01/03/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: COX, NANCY R
Address: 1402 ZARRAGOSSA ST.
City-St-Zip: PENSACOLA, FL 32501

Title: VD () Delete
Name: COX, CHRISTOPHER K
Address: 1402 ZARRAGOSSA ST
City-St-Zip: PENSACOLA, FL 32501

Title: VD () Delete
Name: COX, CONSTANCE E
Address: 1402 W ZARRAGOSSA ST
City-St-Zip: PENSACOLA, FL 32501

Title: VD () Delete
Name: DORMAN, DAVID D
Address: 1402 W ZARRAGOSSA ST.
City-St-Zip: PENSACOLA, FL 32501

Title: S () Delete
Name: WADE, GARY
Address: 1402 W ZARRAGOSSA STREET
City-St-Zip: PENSACOLA, FL 32501

Title: T () Delete
Name: WADE, GARY
Address: 1402 W ZARRAGOSSA ST
City-St-Zip: PENSACOLA, FL 32501

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify 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: GARY WADE

T

01/03/2008

Electronic Signature of Signing Officer or Director

Date