


**2008 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 15, 2008 08:00 AM
Secretary of State

DOCUMENT # 752423		
1. Entity Name GULF SPECIMEN MARINE LABORATORIES, INC.		
Principal Place of Business 222 CLARK DRIVE PANACEA, FL 32346 US		Mailing Address 222 CLARK DRIVE P.O. BOX 237 PANACEA, FL 32346 US
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent RUDLOE, ANNE 222 CLARK DRIVE PANACEA, FL 32346		DO NOT WRITE IN THIS SPACE
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 of registered agent.		
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>		
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		
TITLE	DV	
NAME	RUDLOE, CYPRESS	
STREET ADDRESS	151 CLARK DRIVE	
CITY-ST-ZIP	PANACEA, FL 32346	
TITLE	ST	
NAME	RUDLOE, JACK J.	
STREET ADDRESS	151 CLARK DRIVE	
CITY-ST-ZIP	PANACEA, FL	
TITLE	D	
NAME	FRISBY, DAVID	
STREET ADDRESS	265 MADISON STREET	
CITY-ST-ZIP	MONTICELLO, FL 32345	
TITLE	PD	
NAME	RUDLOE, ANNE	
STREET ADDRESS	151 CLARK DRIVE	
CITY-ST-ZIP	PANACEA, FL	
TITLE	D	
NAME	GOLD, NANCY	
STREET ADDRESS	4876 PEREGRIN POINT CIRCLE NORTH	
CITY-ST-ZIP	SARASOTA, FL 34231	
TITLE		
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.		
SIGNATURE: _____ <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		



01142008 No Chg-NP CR2E037 (4/06)

4. FEI Number 59-2021454	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

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01/16/08-80077-007 61.2

**DO NOT WRITE
IN THIS SPACE**