2005 FOR PROFIT CORPORATION **ANNUAL REPORT**

SIGNATURE:

Jan 31, 2005 8:00 am Secretary of State **DOCUMENT #841808** 01-31-2005 90071 048 ***150.00 **GULF STATES, INCORPORATED** Principal Place of Business Mailing Address 4901 GULFSHORE BLVD. 4585 PROGRESS AVE UNIT 2 #2102 NAPLES, FL 33940 NAPLES, FL 34104 2. Principal Place of Business 3. Mailing Address Progress Ave 4585 Suite, Apt. #, etc. Suite, Apt. #, etc. 01202005 Chg-P CR2E034 (10/03) # 2 Applied For City & State City & State 4. FEI Number 16-0962308 Not Applicable 1001E Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name MADISON, DEANE F Street Address (P.O. Box Number is Not Acceptable) 4901 GULF SHORE BLVD **APT-2102** NAPLES, FL 34103 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 age, 1-27.2005 SIGNATURE (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2005 Fee will be \$550.00 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. ☐ Addition TITLE Change TITLE Delete NAME MADISON, MICHELLE R. NAME 8880d X08.09 STREET ADDRESS STREET ADDRESS 4001 CULESHORE BLVD NO. Ft. Myers, CITY-ST-ZIP CITY-ST-ZIP NAPLES: FL 34103-33968 Change Addition TITLE ☐ Delete TITLE MADISON, PHYLLIS J. NAME NAME 88800 X08 .O.9 STREET ADDRESS 4901 CULFSHORE BLVD NO. STREET ADDRESS NAPLES: FL 94103 CITY+ST-7IE CITY-ST-ZIP Ft. Muers ☐ Change ☐ Addition — 🖸 Delete → 🤝 TITLE TITLE JOHNSON, CINDY L. NAME NAME STREET ADDRESS 20520 CHARING CROSS CIR. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ESTERO, FL Change ☐ Addition ☐ Delete TITLE TITLE CEO MADISON, DEANE NAME P.O. BOX 60888 4901 CULF SHORE BLVD STREET ADDRESS STREET ADDRESS Ft. Myers, FL 33908 CITY-ST-ZIP CITY-ST-ZIP NAPLES, FL 34203 ☐ Delete TITLE ☐ Addition VΡ TITLE ROGERS, MARTIN NAME 3891 Midshore Dr. 611 HICKORY RD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP NAPLES, FL 34108 MADRES CITY-ST-ZIP Change Addition Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), 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 an address, with all other like empowered.

FILED

239-263.7137