2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Dec 03, 2007
Secretary of State

DOCUMENT# 841808

Entity Name: GULF STATES, INCORPORATED

Current Principal Place of Business:

4585 PROGRESS AVE
UNIT 2
NAPLES, FL 34104 US

New Principal Place of Business:

Current Mailing Address:

4585 PROGRESS AVE
UNIT 2
NAPLES, FL 34104 US

New Mailing Address:

FEI Number: 16-0962308 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MADISON, DEANE F
4585 PROGRESS AVE
UNIT 2
NAPLES, FL 34104 US

Name and Address of New Registered Agent:

MADISON, PHYLLIS J
4585 PROGRESS AVE
UNIT 2
NAPLES, FL 34104 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: PHYLLIS J. MADISON 12/03/2007
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: MADISON, MICHELLE R.
Address: PO BOX 60888
City-St-Zip: FORT MYERS, FL 33906

Title: S ( ) Delete
Name: MADISON, PHYLLIS J.,
Address: PO BOX 60888
City-St-Zip: FORT MYERS, FL 33906

Title: VP ( ) Delete
Name: JOHNSON, CINDY L.,
Address: 20520 CHARING CROSS CIR.
City-St-Zip: ESTERO, FL

Title: CEO (X) Delete
Name: MADISON, DEANE
Address: PO BOX 60888
City-St-Zip: FORT MYERS, FL 33906

Title: VP (X) Delete
Name: ROGERS, MARTIN
Address: 3891 MIDSHORE DRIVE
City-St-Zip: NAPLES, FL 34109

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: MADISON, PHYLLIS J
Address: PO BOX 60888
City-St-Zip: FORT MYERS, FL 33906

Title: S,T (X) Change ( ) Addition
Name: MADISON, PHYLLIS J.,
Address: PO BOX 60888
City-St-Zip: FORT MYERS, FL 33906

Title: VP (X) Change ( ) Addition
Name: ROGERS, MARTIN
Address: 3891 MIDSHORE DRIVE
City-St-Zip: NAPLES, FL 34109

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: PHYLLIS J. MADISON PD 12/03/2007
Electronic Signature of Signing Officer or Director Date