

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000001902

FILED
Apr 19, 2009
Secretary of State

Entity Name: GULF BAY LAND INVESTMENTS, INC.

Current Principal Place of Business:

8156 FIDDLERS CREEK PKWY
NAPLES, FL 34114

New Principal Place of Business:

Current Mailing Address:

8156 FIDDLERS CREEK PKWY
NAPLES, FL 34114

New Mailing Address:

FEI Number: 65-0072733 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GRAGGARD, K.LAWRENCE
200 S.BISCAYNE BLVD,STE 4900
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: FERRAO, AUBREY J
Address: 8156 FIDDLERS CREEK PKWY
City-St-Zip: NAPLES, FL 34114

Title: D () Delete
Name: DINARDO, ANTHONY
Address: 8156 FIDDLERS CREEK PKWY
City-St-Zip: NAPLES, FL 34114

Title: D () Delete
Name: HOSOHRA, TETUSO
Address: 805 THIRD AVE 16TH FLOOR
City-St-Zip: NEW YORK, NY 10022

Title: D () Delete
Name: WOODWARD, MARK J
Address: 3200 TAMAMIAMI TRAIL NO. 200
City-St-Zip: NAPLES, FL 34108

Title: D () Delete
Name: PARISI, JOSEPH LIVIO
Address: 8156 FIDDLER'S CREEK PKY
City-St-Zip: NAPLES, FL 34114

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:

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: JOSEPH LIVIO PARISI, AS DIRECTOR

D

04/19/2009

Electronic Signature of Signing Officer or Director

_____ Date