2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F82440

FILED May 01, 2006 Secretary of State

Entity Name: GULF TOWERS OF INDIAN ROCKS BEACH, INC.

Current Principal Place of Business: New Principal Place of Business:

404 GULF BLVD 14680 118TH AVE N

INDIAN ROCKS, FL 33785 LIS SUITE 6

LARGO, FL 33774

Current Mailing Address: New Mailing Address:

404 GULF BLVD PO BOX 250

INDIAN ROCKS, FL 33785 US INDIAN ROCKS BEACH, FL 33785 US

FEI Number: 59-2191177 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SCHIEFER, MARILYN SCHIEFER, MARILYN 404 GULF BLVD 14680 118TH AVE N INDIAN ROCKS BEACH, FL 33785 US SUITE 6 LARGO, FL 33774 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: 05/01/2006

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition

SCHIEFER, MARILYN SCHIEFER, MARILYN Name: Name: 404 GULF BLVD PO BOX 250

Address: Address: City-St-Zip: INDIAN ROCKS BEACH, FL 33785 City-St-Zip: INDIAN ROCKS BEACH, FL 33785

Title: Title: () Delete (X) Change () Addition

SCHIEFER, KURT SCHIEFER, KURT Name: Name:

404 GULF BLVD PO BOX 250 Address: Address:

INDIAN ROCKS BEACH, FL 33785 INDIAN ROCKS BEACH, FL 33785 City-St-Zip: City-St-Zip:

Title: Title: () Delete (X) Change () Addition SCHIEFER, OTTO Name: SCHIEFER, OTTO Name:

404 GULF BLVD. PO BOX 250 Address: Address:

City-St-Zip: INDIAN ROCKS BEACH, FL 33785 City-St-Zip: INDIAN ROCKS BEACH, FL 33785

I hereby certify that the information supplied with this filing does not qualify for the 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: KURT SCHIEFER 05/01/2006 S