

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F82440

FILED
Apr 30, 2007
Secretary of State

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

Current Principal Place of Business:

14680 118TH AVE N
SUITE 6
LARGO, FL 33774 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 250
INDIAN ROCKS BEACH, FL 33785 US

New Mailing Address:

FEI Number: 59-2191177

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHIEFER, MARILYN
14680 118TH AVE N
SUITE 6
LARGO, FL 33774 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: P () Delete
Name: SCHIEFER, MARILYN
Address: PO BOX 250
City-St-Zip: INDIAN ROCKS BEACH, FL 33785

Title: S () Delete
Name: SCHIEFER, KURT
Address: PO BOX 250
City-St-Zip: INDIAN ROCKS BEACH, FL 33785

Title: V () Delete
Name: SCHIEFER, OTTO
Address: PO BOX 250
City-St-Zip: INDIAN ROCKS BEACH, FL 33785

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: V (X) Change () Addition
Name: SCHIEFER, KURT
Address: PO BOX 250
City-St-Zip: INDIAN ROCKS BEACH, FL 33785

Title: S (X) Change () Addition
Name: SCHIEFER, OTTO
Address: PO BOX 250
City-St-Zip: INDIAN ROCKS BEACH, FL 33785

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: MARILYN SCHIEFER

P

04/30/2007

Electronic Signature of Signing Officer or Director

Date