2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
Nov 03, 2007
Secretary of State

DOCUMENT# F98000001126

Entity Name: GULF MARINE INSTITUTE OF TECHNOLOGY, INC.

Current Principal Place of Business:

20 DANIEL DRIVE
GULF BREEZE, FL 32561

New Principal Place of Business:

811 BROADWAY
GALVESTON, TX 77552 US

Current Mailing Address:

PO BOX 776
GULF BREEZE, FL 32562

New Mailing Address:

PO BOX 3144
GALVESTON, TX 77552 US

FEI Number: 31-1475321 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

ERICSSON, JOHN D
20 DANIEL DRIVE
GULF BREEZE, FL 32561 US

Name and Address of New Registered Agent:

ERICSSON, JOHN D
20 DANIEL DRIVE
GULF BREEZE, FL 32562 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: JOHN ERICSSON 11/03/2007
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PCM ( ) Delete
Name: ERICSSON, JOHN D
Address: P.O.BOX 6211
City-St-Zip: GULF BREEZE, FL 32561

Title: ST (X) Delete
Name: BURT, GEORGINE
Address: 20 DANIEL DRIVE
City-St-Zip: GULF BREEZE, FL 32561

Title: D (X) Delete
Name: CAKE, EDWIN W JR
Address: 20 DANIEL DRIVE
City-St-Zip: GULF BREEZE, FL 32561

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DIR (X) Change ( ) Addition
Name: ERICSSON, JOHN D
Address: 811 BROADWAY
City-St-Zip: GALVESTON, TX 77552 US

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOHN ERICSSON DIR 11/03/2007
Electronic Signature of Signing Officer or Director Date