

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H75084

FILED
Mar 18, 2012
Secretary of State

Entity Name: GULF COAST PAINTING AND WATERPROOFING, INC.

Current Principal Place of Business:

C/O GARY L. ADAMS
6363 59TH AVE N.
ST PETERSBURG, FL 33709

New Principal Place of Business:

C/O JOANNE ADAMS
6363 59TH AVE N.
ST PETERSBURG, FL 33709

Current Mailing Address:

C/O GARY L. ADAMS
6363 59TH AVE N.
ST PETERSBURG, FL 33709

New Mailing Address:

C/O JOANNE ADAMS
6363 59TH AVE N.
ST PETERSBURG, FL 33709

FEI Number: 59-2618580

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ADAMS, GARY L PRES
6363 59TH AVE N.
ST PETERSBURG, FL 33709 US

Name and Address of New Registered Agent:

ADAMS, JOANNE
6363 59TH AVE N.
ST PETERSBURG, FL 33709 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: JOANNE ADAMS

03/18/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: ADAMS, GARY L
Address: 6363 59TH AVE N.
City-St-Zip: ST. PETERSBURG, FL 33709

Title: VTS
Name: ADAMS, JOANNE
Address: 6363 59 AVE N
City-St-Zip: ST. PETERSBURG, FL 33709

Title: DIR
Name: ADAMS, PAMELA J
Address: 6363 59 AVE N
City-St-Zip: ST PETERSBURG, FL 33709

I hereby 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 all other like empowered.

SIGNATURE: JOANNE ADAMS

VTS

03/18/2012

Electronic Signature of Signing Officer or Director

Date