

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H98110

FILED  
Apr 22, 2011  
Secretary of State

**Entity Name:** GASPARILLA MARINE SALES, INC.

**Current Principal Place of Business:**

1189 TAMIAMI TRAIL  
PORT CHARLOTTE, FL 33953

**New Principal Place of Business:**

**Current Mailing Address:**

1189 TAMIAMI TRAIL  
PORT CHARLOTTE, FL 33953

**New Mailing Address:**

**FEI Number:** 59-2648176

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

INGMAN, GARY  
1189 TAMIAMI TRAIL  
PORT CHARLOTTE, FL 33953 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

**OFFICERS AND DIRECTORS:**

Title: VD  
Name: INGMAN, ALLEN  
Address: 1189 TAMIAMI TRAIL  
City-St-Zip: PORT CHARLOTTE, FL 33953

Title: PD  
Name: INGMAN, GARY  
Address: 1189 TAMIAMI TRAIL  
City-St-Zip: PORT CHARLOTTE, FL 33953

Title: VST  
Name: MIZE, GARY  
Address: 1189 TAMIAMI TRAIL  
City-St-Zip: PORT CHARLOTTE, FL 33953

Title: VD  
Name: MIZE, VICKI I  
Address: 1189 TAMIAMI TR  
City-St-Zip: PT CHARLOTTE, FL

Title: VD  
Name: INGMAN, JOANNE  
Address: 1189 TAMIAMI TR  
City-St-Zip: PT CHARLOTTE, FL

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: GARY L. MIZE

VST

04/22/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date