

2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

Amended

05 SEP 23 PM 6:30

AMENDED ANNUAL REPORT



09192005 Chg-P CR2E034 (10/03)

4. FEI Number 59-2849613	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

DOCUMENT # J77418

1. Entity Name
GULF MEDICAL SERVICES, INC.



Principal Place of Business
3103 N. 12TH AVE.
PENSACOLA, FL 32503 US

Mailing Address
3103 N. 12TH AVE.
PENSACOLA, FL 32503 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

JERNIGAN, STEPHEN L.
1886 SCHNOOR ROAD
JAY, FL 32565

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

Amended AR is \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
D
JERNIGAN, STEPHEN L.
STREET ADDRESS
1886 SCHNOOR RD
CITY-ST-ZIP
JAY, FL 32565 ☐ Delete

TITLE
NAME
300059874633
STREET ADDRESS
09/23/05--01006--010 **70.00
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
P
STEBER, KENNETH R.
STREET ADDRESS
1615 AVENIDA MARINA
CITY-ST-ZIP
PENSACOLA, FL 32504 ☐ Delete

TITLE
NAME
VICE PRESIDENT
STREET ADDRESS
RICHARD A. ROBERTS
CITY-ST-ZIP
3308 VILLAGE GREEN DRIVE
PACE, FL 32571 ☐ Change ☒ Addition

TITLE
NAME
VICE PRESIDENT
STREET ADDRESS
RICHARD A. ROBERTS
CITY-ST-ZIP
3308 VILLAGE GREEN DRIVE
PACE, FL 32571 ☐ Delete

TITLE
NAME
VICE PRESIDENT
STREET ADDRESS
RICHARD A. ROBERTS
CITY-ST-ZIP
3308 VILLAGE GREEN DRIVE
PACE, FL 32571 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
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STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE: Kenneth R. Steber KENNETH R STEBER 9/21/05 850-438-7600

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #