FILED FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 Feb 13 1998 8:00am **PROFIT** LLOBIDA DEPARTMENT OF STATE **CORPORATION** Sandra B. Mortham **ANNUAL REPORT** Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS **DOCUMENT** # **GULFSTREAM HOLDINGS INC.** Principal Place of Business Mailing Address **607 SUNRISE AVENUE 607 SUNRISE AVENUE** WINTER SPRINGS FL 32708 WINTER SPRINGS FL 32708 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified <u>10/20/1987</u> 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 59-2857387 21 Not Applicable Suite, Apt. #, etc Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zφ Country Country 8. This corporation owes or has paid the current year Intangible 24 25 X Yes 29 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent Name and Address of New Registered Agent 81 Name JORDAN, ROBERT **607 SUNRISE AVENUE** 82 Street Address (P.O. Box Number is Not Acceptable) WINTER SPRINGS FL 32708 83 85 Zip Code 84 City 11. Pursuant to the provisions of Sections 607 0502 and 607 1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607 0505, Florida Statutes. SIGNATURE. (NOTE Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELE 1E TITLE Addition 1.1 TITLE Change NAME JORDAN, ROBERT 1.2 NAME **607 SUNRISE AVENUE** STREET ADDRESS 1.3 STREET ADDRESS WINTER SPRINGS FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change ☐ Addition TITLE 2.1 TITLE NAME SHEA. RICHARD 2.2 NAME STREET ADDRESS 2099 N.E. GINGER TERR 2.3 STREET ADDRESS JENSEN BCH FL CITY-ST-ZIP 2 4 CITY-ST-ZIP DELETE TITLE 3 1 TITLE Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 34. CITY-ST-ZIP DELETE TITLE Change Addition 4.1 TITLE NAME 4 2 NAME STREET ADDRESS 4 3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-7IP DELETÉ

14. Thereby 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 annual report or supplemental annual 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 trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed

5 1 TITLE

5 2 NAME

6.1 TITLE

6.2 NAME

5.3 STREET ADDRESS

63 STREET ADDRESS

6.4 CITY - ST - ZIP

5 4 CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY+ST-ZIP

DELETE

2/10/84

407 698 5995

Change

☐ Change

Addition

☐ Addition