## 2005 FOR PROFIT CORPORATION **ANNUAL REPORT**

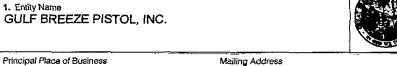
## DOCUMENT # K27864

1. Entity Name

5253 GULF BREEZE PKWY

GULF BREEZE, FL 32563

GULF BREEZE PISTOL, INC.



5253 GULF BREEZE PKWY

GULF BREEZE, FL 32561

**FILED** May 04, 2005 08:00 AM Secretary of State



## DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

05022005 No Chg-P CR2E034 (10/03) Applied For 4. FEI Number

Not Applicable 59-2936428 \$8.75 Additional 5. Certificate of Status Desired Fee Required

MCCAA, EDWIN D 1643 COLLEGE PKWY **GULF BREEZE, FL 32561** 

## DO NOT WRITE IN THIS SPACE

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 Signature, typed or printed name of registered agent and title if applicable. (NOTE, Registered Agent signature required when reinstaling)  DATE					
FILE NOWI!! FEE IS \$550.00  Due by September 7, 2005  9. Election Campaign Finan Trust Fund Contribution.			ig 🔲	\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS					<u> </u>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MCCAA, EDWIN DUKE 1643 COLLEGE PKWAY GULF BREEZE, FL 32561				U00000352481 05/05/05-80119-014 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V ANDERSON, CHARLES C 3608 OLD LEEDS ROAD BIRMINGHAM, AL 35213				
ITILE NAME STREET ADDRESS CITY-ST-ZIP	T MCCAA, EDWIN D II 32 N. I STREET PENSACOLA, FL 32501			DO	NOT WRITE
TITLE NAME STREET ACCRESS CITY-ST-ZIP				IN '	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
NAME STREET ADDRESS CITY-ST-ZIP					
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 cetth, that I am an officer or director					

of the corporation or the receiver or fustee 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:

EDWIN D. MCCAA