

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **L42773** (6)

1. Corporation Name

GULF WEST DEVELOPMENT CORPORATION

Principal Place of Business

**C/O JOHN W. SCHUMACHER, JR.
695 TARPON BAY RD., #14
SANIBEL ISLAND FL 33957**

Mailing Address

**C/O JOHN W. SCHUMACHER, JR.
695 TARPON BAY RD., #14
SANIBEL ISLAND FL 33957**



3. Date Incorporated or Qualified
01/10/1990

3a. Date of Last Report
04/27/1995

4. FEI Number
65-0180044

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

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

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24 Zip Country

29 Zip Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**SCHUMACHER, JOHN W., JR.
695 TARPON BAY ROAD
SUITE #14
SANIBEL FL 33957**

81 Name

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

83

84 City

FL 85 Zip Code

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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent, if not the registered agent

Printed, Registered Agent Signature (typed when not changed)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE
NAME **D HELO, ALFRED M., JR.**
STREET ADDRESS **939 BEACH RD.**
CITY-ST-ZIP **SANIBEL FL**

TITLE ☐ DELETE
NAME **D HALL, JAMES A.**
STREET ADDRESS **4369 WEST GULF DR.**
CITY-ST-ZIP **SANIBEL FL**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
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CITY-ST-ZIP

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STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN '12

☐ Change ☐ Addition

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SIGNATURE:

JAMES A. HALL
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JAMES A. HALL

4/08/96

(941) 472-8585

CR2E034 (12/95)