

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# M54740

**FILED**  
**Mar 20, 2012**  
**Secretary of State**

**Entity Name:** GULF COAST TRANSPORTATION, INC.

**Current Principal Place of Business:**

1701 W CASS ST  
TAMPA, FL 33606

**New Principal Place of Business:**

**Current Mailing Address:**

3000 W CYPRESS CREEK ROAD  
FT. LAUDERDALE, FL 33309

**New Mailing Address:**

5100 TOWN CENTER CIRCLE  
SUITE 300  
BOCA RATON, FL 33486

**FEI Number:** 65-0002720

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MORGAMAN, JUSTIN D  
3000 WEST CYPRESS CREEK ROAD.  
FORT LAUDERDALE, FL 33309 US

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

MORGAMAN, JUSTIN D  
5100 TOWN CENTER CIRCLE  
SUITE 300  
BOCA RATON, FL 33486 US

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: JUSTIN MORGAMAN

03/20/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: VPCD  
Name: MORGAMAN, JUSTIN D  
Address: 5100 TOWN CENTER CIRCLE  
City-St-Zip: BOCA RATON, FL 33486

Title: P  
Name: SEARCY, ROBERT  
Address: 1701 W CASS ST  
City-St-Zip: TAMPA, FL 33606

Title: CFO  
Name: ELHADDAD, AMERA  
Address: 1701 W CASS ST  
City-St-Zip: TAMPA, FL 33606

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: JUSTIN MORGAMAN

VPCD

03/20/2012

Electronic Signature of Signing Officer or Director

Date