2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000007569

Entity Name: SPIRIT OF THE GULF, INC.

FILED Apr 20, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

8509 SOUTHWIND BAY CIR. 12180 WELLESLEY COURT FORT MYERS, FL 33908 FORT MYERS, FL 33913

Current Mailing Address: New Mailing Address:

8509 SOUTHWIND BAY CIR. 12180 WELLESLEY COURT FORT MYERS, FL 33908 FORT MYERS, FL 33908

FEI Number: 65-1068362 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

MUSSELMAN, SUSAN 12180 WELLESLEY COURT FORT MYERS, FL 33913 US

OFFICERS AND DIRECTORS:

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:

Electronic Signature of Registered Agent Date

Electronic eignature of registere

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DIR. () Delete Title: DIR. (X) Change() Addition

Name: HANLON, BETH Name: CHRISTY, VOGT

 Address:
 11866 GRAND ISLES LANE
 Address:
 6422 MORGAN LAFEE LANE

 City-St-Zip:
 FORT MYERS, FL 33913
 City-St-Zip:
 FORT MYERS, FL 33912

Title: DIR. () Delete Title: () Change () Addition

 Name:
 MUSSELMAN, SUSAN
 Name:

 Address:
 12180 WELLESLEY COURT
 Address:

 City-St-Zip:
 FORT MYERS, FL 33913
 City-St-Zip:

Title: DIR () Delete Title: () Change () Addition

 Name:
 KAMRAD, JANET
 Name:

 Address:
 8509 SOUTHWIND BAY CIR.
 Address:

 City-St-Zip:
 FORT MYERS, FL 33908
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SUSAN MUSSELMAN DIR 04/20/2005