


**2006 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 07, 2006 8:00 am**  
**Secretary of State**

04-07-2006 90029 044 \*\*\*150.00

**DOCUMENT # P00000095969**

1. Entity Name  
 GOOSE CREEK DEVELOPERS, INC.



Principal Place of Business  
 241 JOHN KNOX RD, STE 200  
 TALLAHASSEE, FL 32303

Mailing Address  
 2811-E INDUSRIAL PLAZA DR  
 TALLAHASSEE, FL 32301

40046181



2. Principal Place of Business  
 Suite, Apt. #, etc.

3. Mailing Address  
 Suite, Apt. #, etc.

04032006 Chg-P CR2E034 (11/05)

City & State

4. FEI Number  
 59-3675985

Applied For  
 Not Applicable

Zip Country

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

6. Name and Address of Current Registered Agent  
 PRICE, J. RUSSELL  
 241 JOHN KNOX RD, STE 200  
 TALLAHASSEE, FL 32303

7. Name and Address of New Registered Agent  
 Name  
 Street Address (P.O. Box Number is Not Acceptable)  
 City FL Zip Code

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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.  \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D	PRICE, J. RUSSELL	<input type="checkbox"/> Delete
NAME		241 JOHN KNOX RD, STE 200	
STREET ADDRESS		TALLAHASSEE, FL 32303	
CITY-ST-ZIP			
TITLE	D	GHAZVINI, HOSSEIN	<input type="checkbox"/> Delete
NAME		2811 E INDUSTRIAL PLAZA DR	
STREET ADDRESS		TALLAHASSEE, FL 32301	
CITY-ST-ZIP			
TITLE	D	GHAZVINI, BEHZAD	<input type="checkbox"/> Delete
NAME		2818 E INDUSTRIAL PLAZA DR	
STREET ADDRESS		TALLAHASSEE, FL 32301	
CITY-ST-ZIP			
TITLE	D	GHAZVINI, MEHRAN	<input type="checkbox"/> Delete
NAME		2818 E INDUSTRIAL PLAZA DR	
STREET ADDRESS		TALLAHASSEE, FL 32301	
CITY-ST-ZIP			
TITLE	D	GHAZVINI, MEHRDAD	<input type="checkbox"/> Delete
NAME		241 JOHN KNOX RD, STE 200	
STREET ADDRESS		TALLAHASSEE, FL 32303	
CITY-ST-ZIP			
TITLE			<input type="checkbox"/> Delete
NAME			
STREET ADDRESS			
CITY-ST-ZIP			

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE			<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE			<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			
STREET ADDRESS		2811 E Industrial Plaza Dr	
CITY-ST-ZIP			
TITLE			<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			
STREET ADDRESS		2811 E Industrial Plaza Dr	
CITY-ST-ZIP			
TITLE			<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			
STREET ADDRESS		2811 E Industrial Plaza Dr	
CITY-ST-ZIP		Tallahassee, FL 32301	
TITLE			<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			
STREET ADDRESS			
CITY-ST-ZIP			

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Hossein Ghazvini Date: 4/4/06 Daytime Phone #: 514-1000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR