2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000109252

Entity Name: TEXAS GULF BAY VENTURES, INC.

FILED Apr 26, 2007 Secretary of State

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

P. O. BOX 1043 42 BUSINESS CENTER DRIVE

FREEPORT, FL 32439 SUITE 306

MIRAMAR BEACH, FL 32550

Current Mailing Address: New Mailing Address:

P. O. BOX 1043 P. O. BOX 1044

FREEPORT, FL 32439 FREEPORT, FL 32439

FEI Number: 59-3683667 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:

MATTHEWS, DONA C ESQ.

4475 LEGENDARY DR.

DESTIN, FL 32541 US

MATTHEWS, DANA C ESQ.

MATHEWS & HAWKINS, P.A.

4475 LEGENDARY DRIVE

DESTIN, FL 32541 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: DANA C. MATTHEWS 04/26/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP () Delete Title: DP (X) Change () Addition

 Name:
 JONES, C. WAYNE
 Name:
 JONES, C. WAYNE

 Address:
 P. O. BOX 1043
 Address:
 P. O. BOX 1044

 City-St-Zip:
 FREEPORT, FL 32439
 City-St-Zip:
 FREEPORT, FL 32439

Title: ST () Delete Title: ST (X) Change () Addition

 Name:
 LAIRD, HARRY A III
 Name:
 LAIRD, HARRY A III

 Address:
 P. O. BOX 1043
 Address:
 P. O. BOX 1044

 City-St-Zip:
 FREEPORT, FL 32439
 City-St-Zip:
 FREEPORT, FL 32439

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: C. WAYNE JONES DP 04/26/2007