

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000021927

FILED
Apr 01, 2004
Secretary of State

Entity Name: GULFSIDE TITLE OF THE NATURE COAST, INC.

Current Principal Place of Business:

5308 SPRING HILL DR
SPRING HILL, FL 34606

New Principal Place of Business:

103 SOUTH BOULEVARD
TAMPA, FL 33606

Current Mailing Address:

5308 SPRING HILL DR
SPRING HILL, FL 34606

New Mailing Address:

7419 US HIGHWAY 19
NEW PORT RICHEY, FL 34652

FEI Number: 59-3706965

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CARTER, DAVID
5308 SPRING HILL DR
SPRING HILL, FL 34606

Name and Address of New Registered Agent:

CARTER, DAVID
7419 US HIGHWAY 19
NEW PORT RICHEY, FL 34652

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: DAVID R. CARTER

04/01/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: CARTER, DAVID
Address: 5308 SPRING HILL DR
City-St-Zip: SPRING HILL, FL 34606

Title: P () Delete
Name: CARTER, DAVID R
Address: 5308 SPRING HILL DRIVE
City-St-Zip: SPRING HILL, FL 34606

Title: S () Delete
Name: CARTER, DAVID R
Address: 5308 SPRING HILL DRIVE
City-St-Zip: SPRING HILL, FL 34606

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPST (X) Change () Addition
Name: CARTER, DAVID
Address: 7419 US HIGHWAY 19
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: D (X) Change () Addition
Name: CARTER, VICTORIA H
Address: 7419 US HIGHWAY 19
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: DV (X) Change () Addition
Name: BARONE, GARY S
Address: 103 SOUTH BOULEVARD
City-St-Zip: TAMPA, FL 33606

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DAVID R. CARTER

P

04/01/2004

Electronic Signature of Signing Officer or Director

Date