

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 22, 2004 08:00 AM
Secretary of State

DOCUMENT # P01000041469

1. Entity Name
GULF MARINE INVESTMENT CORP.



Principal Place of Business
**14389 RIALTO AVENUE
BROOKSVILLE, FL 34613**

Mailing Address
**14389 RIALTO AVENUE
BROOKSVILLE, FL 34613**

DO NOT WRITE IN THIS SPACE



03162004 No Chg-P CR2E034 (10/03)

4. FEI Number
33-1009819

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**JOHNSTON, DARRYL W ESQ
29 SOUTH BROOKSVILLE AVENUE
BROOKSVILLE, FL 34601**

**DO NOT WRITE
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**000000093531
03/22/04-80022-001 158.75**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**P
WALKER, WILLIAM
14398 RIALTO AVE
BROOKSVILLE, FL 34613**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**V
BRADLEY, JAMES R
6690 RICHARD DR
SPRINGHILL, FL 34607**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**T
BROOKINS, HAPPER C
5234 FOXHALL CT
SPRINGHILL, FL 34607**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**S
SAITIS, JOHN
5411 BARCLAY AVENUE
BROOKSVILLE, FL 34609**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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:

William Walker
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-18-04
Date

352-5964166
Daytime Phone #