

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P01000067516

Entity Name: TOP GUN CONSULTING, INC.

**FILED**  
**Jan 17, 2011**  
**Secretary of State**

## **Current Principal Place of Business:**

2 ALAHAMBRA ST.  
ST. PETE BEACH, FL 33706

## **New Principal Place of Business:**

2 ALHAMBRA ST.  
ST. PETE BEACH, FL 33706

## **Current Mailing Address:**

2 ALAHAMBRA ST.  
ST. PETE BEACH, FL 33706

## **New Mailing Address:**

2 ALHAMBRA ST.  
ST. PETE BEACH, FL 33706

FEI Number: 59-3733566

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## **Name and Address of Current Registered Agent:**

TIMMERMAN, J. TODD  
101 E. KENNEDY BLVD., STE. 2800  
TAMPA, FL 33602 US

## **Name and Address of New Registered Agent:**

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

## **OFFICERS AND DIRECTORS:**

Title: PVT  
Name: CRAIG, GRANT  
Address: 2 ALHAMBRA ST.  
City-St-Zip: ST. PETE BEACH, FL 33706

Title: S  
Name: BARBARA, GRANT  
Address: 2 ALHAMBRA ST.  
City-St-Zip: ST. PETE BEACH, FL 33706

I hereby 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 all other like empowered.

SIGNATURE: CRAIG M GRANT

PRES

01/17/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date