2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000080271

Entity Name: TREASURE ISLAND T-SHIRT COMPANY

FILED Apr 29, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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4930 8TH AVENUE SOUTH GULFPORT, FL 33707

Current Mailing Address: New Mailing Address:

POST OFFICE BOX 9293 TREASURE ISLAND, FL 33740

FEI Number: 26-1761320 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:

GAYTON, ALICIA H
770 115TH AVENUE
TREASURE ISLAND, FL 33706 US
GAYTON, JOHN J
4930 8TH AVE SOUTH
GULFPORT, FL 33707 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: JOHN J GAYTON 04/29/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 GAYTON, EDWARD J III
 Name:
 GAYTON, JOHN J

 Address:
 POST OFFICE BOX 9293
 Address:
 POST OFFICE BOX 9293

 City-St-Zip:
 TREASURE ISLAND, FL 33740
 City-St-Zip:
 TREASURE ISLAND, FL 33740

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

 Name:
 GAYTON, ALICIA H
 Name:

 Address:
 POST OFFICE BOX 9293
 Address:

 City-St-Zip:
 TREASURE ISLAND, FL 33740
 City-St-Zip:

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

 Name:
 GAYTON, JOHN J
 Name:

 Address:
 4930 8TH AVE SOUTH
 Address:

 City-St-Zip:
 GULFPORT, FL 33707
 City-St-Zip:

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: JOHN J GAYTON PTD 04/29/2009