

2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P01000090622

FILED
Oct 28, 2008
Secretary of State**Entity Name:** GULF SHORE EXCAVATING, INC.**Current Principal Place of Business:**14205 HAYS RD
SPRINGHILL, FL 34610**New Principal Place of Business:****Current Mailing Address:**14205 HAYS RD
SPRINGHILL, FL 34610**New Mailing Address:****FEI Number:** 59-3745149**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**TINGIRIDES, STAVROS
804 N. BELCHER RD., STE. 100
CLEARWATER, FL 33765 US**Name and Address of New Registered Agent:**SANTANGELO, LARRY
14205 HAYS RD
SPRING HILL, FL 34610 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: LARRY SANTANGELO

10/28/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:**Title:** D () Delete
Name: SANTANGELO, LARRY
Address: 14205 HAYS RD
City-St-Zip: SPRINGHILL, FL 34610**Title:** D () Delete
Name: LUCENTI, JOHN F
Address: 14205 HAYS RD
City-St-Zip: SPRINGHILL, FL 34610**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
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: LARRY SANTANGELO

D

10/28/2008

Electronic Signature of Signing Officer or Director

Date