

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000003955

FILED  
Jan 09, 2009  
Secretary of State

Entity Name: GULF COAST INTERIOR DESIGN, INC.

**Current Principal Place of Business:**

26004 NORTE DAME BLVD  
PUNTA GORDA, FL 33955

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 511748  
PUNTA GORDE, FL 33951

**New Mailing Address:**

P.O. BOX 511748  
PUNTA GORDA, FL 33951

FEI Number: 26-0022242

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

FILEMAN, GARY T  
1625 WEST MARION AVENUE SUITE 2  
PUNTA GORDA, FL 33950 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: ECKHOFF, LINDA K  
Address: 26004 NOTRE DAME  
City-St-Zip: PUNTA GORDA, FL 33955

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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: LINDA K ECKHOFF

P

01/09/2009

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

\_\_\_\_\_  
Date