# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Apr 15, 2009**
**Secretary of State**

DOCUMENT# P02000018925

**Entity Name:** FLORIDA GULFSIDE SERVICES, INC.

**Current Principal Place of Business:**

709 SHAKETT CREEK DR
NOKOMIS, FL 34275

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 22031
SARASOTA, FL 34276

**New Mailing Address:**

**FEI Number: 75-3008612** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

PAGAN, MOLLY M VP
709 SHAKETT CREEK DR
NOKOMIS, FL 34275 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: PAGAN, ELIAZER
Address: 4735 RIVERWOOD CIRCLE
City-St-Zip: SARASOTA, FL 34231

Title: VP ( ) Delete
Name: PAGAN, MOLLY M
Address: 4735 RIVERWOOD CIRCLE
City-St-Zip: SARASOTA, FL 34231

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

Title: P (X) Change ( ) Addition
Name: PAGAN, ELIAZER
Address: 709 SHAKETT CREEK DR
City-St-Zip: NOKOMIS, FL 34275

Title: VP (X) Change ( ) Addition
Name: PAGAN, MOLLY M
Address: 709 SHAKETT CREEK DR
City-St-Zip: NOKOMIS, FL 34275

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: MOLLY PAGAN VP 04/15/2009

Electronic Signature of Signing Officer or Director — Date