

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P02000112031

FILED
Dec 18, 2009
Secretary of State**Entity Name:** GULFPORT BARCELONA APARTMENTS, INC.**Current Principal Place of Business:**2831 DUPONT ST.
GULFPORT, FL 33707**New Principal Place of Business:****Current Mailing Address:**6860 GULFPORT BLVD., S.
BOX 272
SOUTH PASEDENA, FL 33707**New Mailing Address:****FEI Number:** 55-0802217**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**WOODRUM, PAMELA J
6860 GULFPORT BLVD., S.
BOX 272
SOUTH PASEDENA, FL 33707 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: P () Delete
Name: WOODRUM, PAMELA J
Address: 6860 GULFPORT BLVD., S. #272
City-St-Zip: SOUTH PASADENA, FL 33707

Title: VP () Delete
Name: SCALLY, DAVID
Address: 6860 GULFPORT BLVD., S.
City-St-Zip: SOUTH PASEDENA, FL 33707

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: PAMELA J WOODRUM

PRES

12/18/2009

Electronic Signature of Signing Officer or Director_____
Date