## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## Apr 20, 2007 8:00 am Secretary of State DOCUMENT # P03000077415 1. Entity Name 04-20-2007 90082 028 \*\*\*158.75 GULFSTREAM CONTRACTORS, INC. Principal Place of Business Mailing Address שיטטף 1313 WEST MIDWAY ROAD 1313 WEST MIDWAY ROAD FT. PIERCE, FL 34982 FT. PIERCE, FL 34982 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04102007 CR2E034 (12/06) City & State City & State 4. FEI Number Applied For 45-0522640 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Howard L. Searcy, Jr. SEARCH, HOWARD L JR Street Address (P.O. Box Number is Not Acceptable) 1313 WEST MIDWAY RD FORT PIERCE, FL 34982 1313 West Midway Road City Zip Code 34982 Fort Pierce 8. 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. I am familiar with, and accept the obligations of registered agent. 4/10/07 SIGNATURE Signature, typed o NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2007 Fee will be \$550.00 Added to Fees OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. PD Delete IIILE TITLE ☐ Addition Change SEARCY, HOWARD L JR NAME NAME 1313 WEST MIDWAY RD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP FORT PIERCE, FL 34982 CITY-ST-ZIP Defete ☐ Change ☐ Addition NAME MURPHY, TRAVIS E JR NAME 1313 WEST MIDWAY RD STREET ADDRESS STREET ADDRESS FORT PIERCE, FL 34982 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Addition TITLE ☐ Change TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY - ST - ZIP Change Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7/P CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if

**FILED** 

changed, or on an attachment with an address, with all other like impowered. TravisE. Murphy, Jr. 4/10/07 SIGNATURE: