2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000089008

Entity Name: GULF AMERICAN MORTGAGE, INC.

FILED Jan 11, 2008 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
--------------------------------------	---

7359 HERITAGE PALMS ESTATES DRIVE FORT MYERS, FL 33966 US

Current Mailing Address: New Mailing Address:

7359 HERITAGE PALMS ESTATES DRIVE FORT MYERS, FL 33966 US

FEI Number: 20-0160555 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

CULBERTSON, BRIAN M CULBERTSON, KAREN M

7359 HERITAGE PALMS ESTATES DRIVE 7359 HERITAGE PALMS ESTATES DRIVE

FORT MYERS, FL 33966 US FORT MYERS, FL 33966 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: KAREN CULBERTSON 01/11/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition

Name: CULBERTSON, BRIAN M Name: CULBERTSON, KAREN

Address: 7359 HERITAGE PALMS ESTATES DRIVE Address: 7359 HERITAGE PALMS ESTATES DRIVE

City-St-Zip: FORT MYERS, FL 33912 US City-St-Zip: FORT MYERS, FL 33966 US

Title: VP (X) Delete Title: () Change () Addition Name: CULBERTSON, KAREN C Name:

Address: 7359 HERITAGE PALMS ESTATES DRIVE Address: City-St-Zip: FORT MYERS, FL 33912 US City-St-Zip:

Title: SECR (X) Delete Title: () Change () Addition

 Name:
 CULBERTSON, BRIAN M
 Name:

 Address:
 7359 HERITAGE PALMS ESTATES DRIVE
 Address:

 City-St-Zip:
 FORT MYERS, FL 33912
 City-St-Zip:

Title: TRES (X) Delete Title: () Change () Addition

 Name:
 CULBERTSON, BRIAN M
 Name:

 Address:
 7359 HERITAGE PALMS ESTATES DRIVE
 Address:

 City-St-Zip:
 FORT MYERS, FL 33912
 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: KAREN CULBERTSON PRES 01/11/2008