2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000081546

City-St-Zip:

VENICE, FL 34293

Entity Name: GULF COAST POOL FINISHERS INC.

FILED Jan 14, 2005 Secretary of State

Littly Nai	me. Golf Co	DAST FOOLT INISHLERS, INC					
Current Principal Place of Business:			New Prince	New Principal Place of Business:			
1008 PON VENICE, F	DEROSA RD FL 34293						
Current Mailing Address:			New Mailing Address:				
1008 PON VENICE, F	DEROSA RD FL 34293						
FEI Number: 20-1171808 FEI Number Applied For () FEI N			FEI Number Not App	umber Not Applicable () Certificate of Status Desired ()			
Name and	Address of C	Current Registered Agent:	Name and	Name and Address of New Registered Agent:			
PORVAZN 1008 PON VENICE, F	DÉROSA RD	S					
The above in the State	named entity : e of Florida.	submits this statement for the p	ourpose of changing i	ts registered	office or registered agent,	or both,	
SIGNATU	RE:						
	Electror	nic Signature of Registered Age	ent	Date			
Election Car	npaign Financin	g Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	DT () PORVAZNIK, D 500 CARMEL F VENICE, FL 34	RD	Title: Name: Address: City-St-Zip:	DT (LAMBERT, TH 135 AVENIDA NOKOMIS, FL	BAHIA		
Title: Name: Address: City-St-Zip:	PD () PORVAZNIK, J 1008 PONDER VENICE, FL 34	OSA RD	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address:	SD () CURTIS, CORY 1008 PONDER		Title: Name: Address:	() Change () Addition		

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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.

City-St-Zip:

SIGNATURE: JOHN PORVAZNIK PD 01/14/2005