2006 FOR PROFIT CORPORATION ANNUAL REPORT

Electronic Signature of Registered Agent

DOCUMENT# P05000065605

Entity Name: GULFCO EQUIPMENT, INC.

FILED Apr 11, 2006 Secretary of State

Current Principal Place o	f Business:	New Principal Place of	Business:
401 CECIL G. COSTIN, SR PORT ST. JOE, FL 32456		273 JAMES DRIVE WEWAHITCHKA, FL 32	465 US
Current Mailing Address:	:	New Mailing Address:	
401 CECIL G. COSTIN, SR PORT ST. JOE, FL 32456		273 JAMES DRIVE WEWAHITCHKA, FL 32	465 US
FEI Number: 04-3814289	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:			
GROOM, PAUL W II 206 E. FOURTH STREET PORT ST. JOE, FL 32456	US		
The above named entity suin the State of Florida.	bmits this statement for the pur	pose of changing its registered o	ffice or registered agent, or both,
SIGNATURE:			

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete

Name: SMILEY, WILLIAM J Address: 401 CECIL G. COSTIN, SR. BLVD.

City-St-Zip: PORT ST. JOE, FL 32456 US

 Title:
 VPD () Delete

 Name:
 WOOTEN, CLAYTON B

 Address:
 273 JAMES DRIVE

City-St-Zip: WEWAHITCHKA, FL 32465 US

Title: TSD (X) Delete
Name: CLAYTON, ANDREW
Address: 216 E. RIVER ROAD

City-St-Zip: WEWAHITCHKA, FL 32465 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Date

Title: PD (X) Change () Addition

Name: WOOTEN, CLAYTON B Address: 273 JAMES DRIVE

City-St-Zip: WEWAHITCKA, FL 32465 US

Title: VPD (X) Change () Addition

Name: CLAYTON, NORRIS A
Address: 832 SOUTH 2ND STREET
City-St-Zip: WEWAHITCHKA, FL 32465 US

Title: () Change () Addition

Name: Address: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: CLAYTON B. WOOTEN PD 04/11/2006