2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 06, 2006 8:00 am
Secretary of State
09-06-2006 90040 044 ***150.00

DOCUMENT # P05000087284

1. Entity Name
GULF COAST DOCUMENT SOLUTIONS INC.

Principal Place of Business	Mailing Address
10307 MEADOW CROSSING DR TAMPA, FL 33647	10307 MEADOW CROSSING DR TAMPA, FL 33647

08222006 Chg-P CR2E034 (11/05)

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 56-2522385 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
MINER, WILFORD U 10307 MEADOW CROSSING DR TAMPA, FL 33647	Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code

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.

SIGNATURE ______________________________
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $550.00
Due by September 6, 2006

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MINER, WILFORD U 10307 MEADOW CROSSING DR TAMPA, FL 33647	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: [signature] 8/28/06 813-476-0554
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Gulf Coast Document Solutions Inc

Notary Public

ATTACHMENT

40103157
#P05000087284

YOUR DOCUMENT SIGNING SOLUTIONS

10307 Meadow Crossing Dr. Tampa, FL 33647
Bus (813) 476-0554 Fax (813) 994-3159
Gulfcoastdocsol@aol.com

8/28/06

ATTN: Division of Corporations

To Whom it May Concern;

I had no knowledge of the Annual Report being due. I never received notice. This is my first year in business. This will never happen again now that I am aware of the report, the reporting process and when it is due.

Wilford H. Miner