

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000151376

FILED  
Apr 04, 2006  
Secretary of State

Entity Name: GULF CONNECTION MORTGAGE CORPORATION

## Current Principal Place of Business:

2511 VASCOE STREET  
UNIT 114  
PUNTA GORDA, FL 33950

## New Principal Place of Business:

26530 MALLARD WAY  
PUNTA GORDA, FL 33950

## Current Mailing Address:

2511 VASCOE STREET  
UNIT 114  
PUNTA GORDA, FL 33950

## New Mailing Address:

26530 MALLARD WAY  
PUNTA GORDA, FL 33950

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ROSSEY, DEAN SR.  
2511 VASCOE STREET  
UNIT 114  
PUNTA GORDA, FL 33950 US

## Name and Address of New Registered Agent:

ROSSEY, DEAN SR.  
26530 MALLARD WAY  
PUNTA GORDA, FL 33950 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:

04/04/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: ROSSEY, DEAN SR.  
Address: 2511 VASCOE STREET UNIT 114  
City-St-Zip: PUNTA GORDA, FL 33950

Title: D ( ) Delete  
Name: CHARLAND, DEBORAH  
Address: 2511 VASCOE STREET UNIT 114  
City-St-Zip: PUNTA GORDA, FL 33950

Title: D (X) Delete  
Name: OBEN, GARY SR.  
Address: 2511 VASCOE STREET UNIT 114  
City-St-Zip: PUNTA GORDA, FL 33950

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: ROSSEY, DEAN SR.  
Address: 26530 MALLARD WAY  
City-St-Zip: PUNTA GORDA, FL 33950

Title: D (X) Change ( ) Addition  
Name: OBEN, GARY W SR  
Address: 26530 MALLARD WAY  
City-St-Zip: PUNTA GORDA, FL 33950

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: GARY W. OBEN, SR

D

04/04/2006

Electronic Signature of Signing Officer or Director

Date