

# **2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P06000008248

**FILED**  
**Aug 20, 2007**  
**Secretary of State**

**Entity Name:** GULF COAST DEVELOPMENT GROUP OF NORTHWEST FLORIDA INC.

**Current Principal Place of Business:**

116-B MCCLURE DRIVE  
GULF BREEZE, FL 32561 US

**New Principal Place of Business:**

**Current Mailing Address:**

116-B MCCLURE DRIVE  
GULF BREEZE, FL 32561 US

**New Mailing Address:**

**FEI Number:** 20-4145552      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

LOGAN, SANDI C  
116B MCCLURE DRIVE  
GULF BREEZE, FL 32561 US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P D ( ) Delete  
Name: COLSTON, BRENDA  
Address: 200 PENSACOLA BEACH RD M3  
City-St-Zip: GULF BREEZE, FL 32561 US

Title: T D ( ) Delete  
Name: COLSTON, JAMIE  
Address: 211 FIRETHORN RD  
City-St-Zip: GULF BREEZE, FL 32561 US

Title: S D ( ) Delete  
Name: PLACHTE, JEFF  
Address: 3265 MAPLEWOOD  
City-St-Zip: GULF BREEZE, FL 32563 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: T D (X) Change ( ) Addition  
Name: LOGAN, SANDI C  
Address: 116B MCCLURE DRIVE  
City-St-Zip: GULF BREEZE, FL 32561 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: SANDI C. LOGAN

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

T D

08/20/2007

\_\_\_\_\_  
Date