

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000032625

FILED
Apr 21, 2009
Secretary of State

Entity Name: GULF COAST COUNTERTOPS, INC.

Current Principal Place of Business:

7104 E. 9TH AVENUE
TAMPA, FL 33614

New Principal Place of Business:

Current Mailing Address:

4034 N. DAVIS HWY
PENSACOLA, FL 32503

New Mailing Address:

FEI Number: 20-4471109

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BLACK, LISA
4034 N. DAVIS HWY
PENSACOLA, FL 32503 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: BRAXTON, NEAL
Address: 4087 BELL LANE
City-St-Zip: PACE, FL 32571

Title: P () Delete
Name: BRAXTON, BARBARA
Address: 4087 BELL LANE
City-St-Zip: PACE, FL 32571

Title: V () Delete
Name: BLACK, LISA
Address: 5056 HARTLEY DR.
City-St-Zip: PACE, FL 32571

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: LISA BLACK

VP

04/21/2009

Electronic Signature of Signing Officer or Director

Date