

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P06000049269

**FILED**  
**Mar 24, 2010**  
**Secretary of State**

**Entity Name:** GULF COAST MATERIAL HANDLING, INC.

**Current Principal Place of Business:**

100 SOUTH KENTUCKY AVENUE, SUITE 215  
LAKELAND, FL 33801

**New Principal Place of Business:**

5147 S LAKELAND DR  
SUITE 2  
LAKELAND, FL 33813

**Current Mailing Address:**

100 SOUTH KENTUCKY AVENUE, SUITE 215  
LAKELAND, FL 33801

**New Mailing Address:**

5147 S LAKELAND DR  
SUITE 2  
LAKELAND, FL 33813

**FEI Number:** 20-4634505

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MIMS, WILLIAM T  
100 SOUTH KENTUCKY AVENUE SUITE 215  
LAKE5LAND, FL 33607 US

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

MIMS, WILLIAM T  
5147 S LAKELAND DR  
SUITE 2  
LAKELAND, FL 33813 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:

03/24/2010

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: D  
Name: MIMS, WILLIAM THOMAS  
Address: 5147 S LAKELAND DR STE 2  
City-St-Zip: LAKELAND, FL 33813

I hereby 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 all other like empowered.

SIGNATURE: WILLIAM T. MIMS

D

03/24/2010

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

\_\_\_\_\_  
Date