

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000118444

FILED
Jan 25, 2007
Secretary of State

Entity Name: GULF COAST HEALTHCARE SYSTEMS, INC.

Current Principal Place of Business:

2718C LEE BOULEVARD
LEHIGH ACRES, FL 33971

New Principal Place of Business:

2718-C LEE BOULEVARD
LEHIGH ACRES, FL 33971

Current Mailing Address:

P.O. BOX 1747
LEHIGH ACRES, FL 33970

New Mailing Address:

FEI Number: 41-2214169

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 US

Name and Address of New Registered Agent:

JONES, RUDOLPH
5326 BILLINGS ST
LEHIGH ACRES, FL 33971 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: RUDOLPH JONES

01/25/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEO () Change (X) Addition
Name: JONES, RUDOLPH
Address: 5326 BILLINGS ST
City-St-Zip: LEHIGH ACRES, FL 33971 US

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: RUDOLPH JONES

CEO

01/25/2007

Electronic Signature of Signing Officer or Director

Date