

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000016440

FILED  
Apr 11, 2009  
Secretary of State

Entity Name: GULF COAST COLLISION INC.

## Current Principal Place of Business:

8939 U.S. HWY 19  
PORT RICHEY, FL 34668 US

## New Principal Place of Business:

## Current Mailing Address:

PO BOX 1168  
ELFERS, FL 34680 US

## New Mailing Address:

8939 U.S. HWY 19  
PORT RICHEY, FL 34668 US

FEI Number: 20-8393036

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HYDE PARK ACCOUNTANTS, PA  
2305 W MORRISON AVE  
TAMPA, FL 33629 US

## Name and Address of New Registered Agent:

HOWELLS, TIMOTHY C.P.A.  
11905 OAK TRAIL WAY  
PORT RICHEY, FL 34668 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: TIMOTHY HOWELLS, C.P.A.

04/11/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: HESSER, DAVID W  
Address: 1526 FISHING LAKE DR  
City-St-Zip: ODESSA, FL 33556 US

Title: VP ( ) Delete  
Name: HESSER, CHRISTINA A  
Address: 1526 FISHING LAKE DR  
City-St-Zip: ODESSA, FL 33556 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: CHRISTINA A. HESSER

V.P.

04/11/2009

Electronic Signature of Signing Officer or Director

Date