## 2008 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P07000125809

Entity Name: GULF COAST CLEANING & CARE INC.

FILED Oct 29, 2008 Secretary of State

Current Principa	al Place of Business:	New Principal Place of Business:

60 SANDPRINTS DRIVE 31 PAYNE STREET

MIRAMAR BEACH, FL 32550 US B -10

MIRAMAR BEACH, FL 32550 US

**New Mailing Address: Current Mailing Address:** 

60 SANDPRINTS DRIVE 31 PAYNE STREET

MIRAMAR BEACH, FL 32550 US

MIRAMAR BEACH, FL 32550 US

FEI Number: 26-1458287 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

FANELLA, NICHOLAS R 434 TANGLEWOOD DRIVE FORT WAL; TON BEACH, FL 32547 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: NICHOLAS R FANELLA

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD () Delete Title: **PSD** (X) Change ( ) Addition

Name: COLON, DIANA Name: COLON, DIANA 60 SANDPRINTS DRIVE B-10 31 PAYNE STREET Address: Address:

City-St-Zip: MIRAMAR BEACH, FL 32550 US City-St-Zip: MIRAMAR BEACH, FL 32550 US

VPD Title: VPD Title: () Delete (X) Change ( ) Addition Name: MCLENDON, MEDEA Name: MCLENDON, MEDEA

60 SANDPRINTS DRIVE B-10 31 PAYNE STREET Address: Address:

MIRAMAR BEACH, FL 32550 US MIRAMAR BEACH, FL 32550 US City-St-Zip: City-St-Zip:

Title: VPD Title: VPD ( ) Delete (X) Change ( ) Addition

DEWS, LORI DEWS, LORI Name: Name: 60 SANDPRINTS DRIVE B-10 31 PAYNE STREET Address Address:

City-St-Zip: MIRAMAR BEACH, FL 32550 US City-St-Zip: MIRAMAR BEACH, FL 32550 US

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: DIANA COLON **PSD** 10/29/2008