

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000000745

FILED  
Mar 02, 2009  
Secretary of State

Entity Name: GULF ATLANTIC WHOLESALE INC

## Current Principal Place of Business:

7807 ALHAMBRA DRIVE  
BRADENTON, FL 34209

## New Principal Place of Business:

5306 MANATEE AVE WEST  
BRADENTON, FL 34209

## Current Mailing Address:

7807 ALHAMBRA DRIVE  
BRADENTON, FL 34209

## New Mailing Address:

FEI Number: 26-1762593      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ROSSI, ROBERT  
7807 ALHAMBRA DRIVE  
BRADENTON, FL 34209      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: P ( ) Delete  
Name: ROSSI, ROBERT  
Address: 7807 ALHAMBRA DRIVE  
City-St-Zip: BRADENTON, FL 34209

Title: VP (X) Delete  
Name: ALLION, DARRYL  
Address: 1962 BEL AIR STAR PARKWAY  
City-St-Zip: SARASOTA, FL 34240

Title: ST (X) Delete  
Name: LEWIS, GARY  
Address: 1508 18TH AVE WEST  
City-St-Zip: PALMETTO, FL 34221

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PST (X) Change ( ) Addition  
Name: ROSSI, ROBERT  
Address: 7807 ALHAMBRA DRIVE  
City-St-Zip: BRADENTON, FL 34209

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: ROBERT ROSSI

P

03/02/2009

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

\_\_\_\_\_  
Date