## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P92000011241

Entity Name: GULF ATLANTIC GROUP, INC.

FILED May 01, 2007 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
2549 BARRINGTON CIR TALLAHASSEE, FL 32308					
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
PO BOX 12200 TALLAHASSEE, FL 323172200					
FEI Number:	59-3155103	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:					
MATLOCK, GEORGE V 2549 BARRINGTON CIR TALLAHASSEE, FL 32308 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:					
	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: Name: Address: City-St-Zip:	CD () DO JACOBS, JOSEPH 2549 BARRINGTO TALLAHASSEE, F	HW ON CIR	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	PSD () DO MATLOCK, GEOR 2549 BARRINGTO TALLAHASSEE, F	GEV ON CIR	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D () DO PATTERSON, TOI 2549 BARRINGTO TALLAHASSEE, F	DD D DN CIR	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D () DECKERLEIN, R F 2549 BARRINGTO TALLAHASSEE, F	DPM ON CIR	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	T () DO GABEL, WILLIAM 2549 BARRINGTO TALLAHASSEE, F	P ON CIR	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	VD () DO THOMPSON, WILL 2549 BARRINGTO TALLAHASSEE, F	LIAM J DN CIR	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
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: WILLIAM GABEL Τ 05/01/2007