## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P93000004855

Title:

Name:

Address:

City-St-Zip:

Entity Name: GULF PLACE CORPORATION

FILED Apr 25, 2009 Secretary of State

Entity Name: GULF PLACE CORPORATION							
Current Principal Place of Business:					New Principal Place of Business:		
	ENTER LOOP SA BEACH, F		US				
Current Mailing Address:					New Mailing Address:		
	ENTER LOOP SA BEACH, F		US				
FEI Number:	59-3172549	FEI Numb	er Applied For()	FEI Num	nber Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:					Name and Address of New Registered Agent:		
RICHARD J. ROOKIS 7 TOWN CENTER LOOP C-14 SANTA ROSA BEACH, FL 32459 US					KOCHE, DAVID L 601 BAYSHORE BLVD STE 700 TAMPA, FL 33606 US		
The above in the State		ubmits this	s statement for the	purpose of	f changing its registered	office or registered agent, or both,	
SIGNATURE: DAVID L. KOCHE						04/25/2009	
	Electroni	ic Signatur	e of Registered Ag	jent		Date	
Election Cam	paign Financing	Trust Fund	Contribution ( ).				
OFFICERS AND DIRECTORS:					ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	PD () ANDREWS, AND 35000 EMERAL DESTIN, FL		ARKWAY		Title: ( Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	VPD () ABBOTT, WILLI, 35000 EMERAL DESTIN, FL 329	D COAST PA	ARKWAY		Title: ( Name: Address: City-St-Zip:	( ) Change( ) Addition	
Title: Name: Address: City-St-Zip:	D () ABBOTT, STEPH 35000 EMERAL DESTIN, FL 329	D COAST PA	ARKWAY		Title: ( Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	VPD () VANDIVER, CHA 35000 EMERAL DESTIN, FL 329	D COAST PA	ARKWAY		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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: RICHARD J. ROOKIS D 04/25/2009

( ) Delete

7 TOWN CENTER LOOP C-14

SANTA ROSA BEACH, FL 32459

ROOKIS, RICHARD J

() Change () Addition