

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 23, 2007 8:00 am**  
**Secretary of State**

04-23-2007 90067 020 \*\*\*150.00

**DOCUMENT # P93000006976**

1. Entity Name  
**GULF AGRIFINANCE, INC.**



Principal Place of Business  
**2825 TAMiami TRAIL  
BLDG. C  
PUNTA GORDA, FL 33950**

Mailing Address  
**P.O. BOX 51-2116  
PUNTA GORDA, FL 33951**

**40074307**



2. Principal Place of Business - No P.O. Box #  
**5377 Duncan Rd**  
Suite, Apt. #, etc.

3. Mailing Address  
**PO Box 512116**  
Suite, Apt. #, etc.

04162007 Chg-P CR2E034 (12/06)

City & State  
**Punta Gorda, FL**

City & State

4. FEI Number  
**65-0383167**

Applied For  
Not Applicable

Zip  
**33982**

Country  
**Charlotte**

Zip

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

## 6. Name and Address of Current Registered Agent

**WINSLOW, GEORGE A  
2825 TAMiami TRAIL  
BLDG C  
PUNTA GORDA, FL 33950**

## 7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

**5377 Duncan Rd**

City

**Punta Gorda**

FL

Zip Code  
**33982**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and date is applicable.

(NOTE: Registered Agent signature required when re-registering)

DATE

**4/18/07**

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

## 10. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP  
**DVT  
WINSLOW, GEORGE A  
2825 TAMiami TRAIL, BLDG. C  
PUNTA GORDA, FL** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP  
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STREET ADDRESS  
CITY-STATE-ZIP  
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TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP  
☐ Delete

## 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP  
**5377 Duncan Rd  
Punta Gorda, FL 33982** ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP  
☐ Change ☐ Addition

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CITY-STATE-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP  
☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address and all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**4-18-07**

Date

**(941)575-1505**

Daytime Phone #