2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000057477

FILED Jun 09, 2009 Secretary of State

Entity Name: GULF PROPERTIES OF MANATEE, INC.					
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	TFIELD AVENU A, FL 34243	JE			
Current Mailing Address:			New Mailing Address	New Mailing Address:	
	ITVILLE ROAD A, FL 34237	US			
FEI Number:	: 65-0433212	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	I Address of C	current Registered Agent:	Name and Address of	Name and Address of New Registered Agent:	
2381 FRU	MICHAEL R JF ITVILLE ROAD A, FL 34237		DESROSIERS, JOHN 2560 WHITFIELD AVE SARASOTA, FL 34243		
	named entity se of Florida.	submits this statement for the p	ourpose of changing its registered	d office or registered agent, or both,	
SIGNATURE: JOHN DESROSIERS				06/09/2009	
Electronic Signature of Registered Agent			ent	Date	
		3(2)(b), F.S., the corporation did no g Trust Fund Contribution ().	ot receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	VP () DESROSIERS, 340 S PALM AV SARASOTA, FL	/E STE 73	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	S () DESROSERS, 3 2560 WHITFIEL SARASOTA, FL	_D AVENUE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	P (X) PENDER, JR, M 2381 FRUITVIL SARASOTA, FL	LE ROAD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title:	T ()	Delete FLLE	Title:	() 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.

Address:

City-St-Zip:

SIGNATURE: JOHN DESROSIERS MR 06/09/2009

8058 DESOTO WOODS DRIVE

SARASOTA, FL 34243

Address:

City-St-Zip: