2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000071550

Entity Name: GULFVIEW PROPERTIES OF TAMPA, INC.

TAMPA, FL 33629 US

City-St-Zip:

FILED Apr 14, 2009 Secretary of State

Current D	win singl Blos	a of Business	New Principal E	loss of Business	
Current Principal Place of Business:			New Principal P	New Principal Place of Business:	
1220 S DALE MABRY HWY				1220 S DALE MABRY HWY	
SUITE 201			SUITE 208		
TAMPA, FL 33629			TAIVIPA, FL 3362	TAMPA, FL 33629	
Current M	lailing Addre	ss:	New Mailing Ad	New Mailing Address:	
1220 S DALE MABRY HWY			1220 S DALE MA	1220 S DALE MABRY HWY	
SUITE 201			SUITE 208		
TAMPA, F	L 33629		TAMPA, FL 3362	29	
FEI Number	: 59-3205794	FEI Number Applied For ()	FEI Number Not Applicable () Certificate of Status Desired ()	
Name and	Address of	Current Registered Agent:	Name and Addre	Name and Address of New Registered Agent:	
1220 S DA SUITE 201	A, JOSEPH V ALE MABRY H I L 33629 US				
	e named entity e of Florida.	submits this statement for the	purpose of changing its regi	stered office or registered agent, or both,	
SIGNATUI	RE:				
Electronic Signature of Registered Agent			jent	Date	
Election Car	mpaign Financir	ng Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CH/	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title:	D () Delete	Title:	() Change () Addition	
Name:	CANNELLA, G		Name:		
Address:		MABRY HWY SUITE 201	Address:		
City-St-Zip:	TAMPA, FL 33	0079 02	City-St-Zip:		
Title:	ST () Delete	Title:	() Change () Addition	
Name:	PELEGRINO,		Name:		
Address:	1220 S. DALE	MABRY HWY SUITE 201	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: GEMMA B. CANNELLA D 04/14/2009