

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 30, 2005 08:00 AM
Secretary of State

DOCUMENT # P93000073448 1. Entity Name GIBALTAR FINANCIAL CORPORATION	
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Principal Place of Business 220 ALHAMBRA CIRCLE FIFTH FLOOR CORAL GABLES, FL 33134 US	Mailing Address 220 ALHAMBRA CIRCLE FIFTH FLOOR CORAL GABLES, FL 33134 US
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DO NOT WRITE IN THIS SPACE

04262005 No Chg-P CR2E034 (10/03)

4. FEI Number 65-0444764	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent BARTHET, PATRICK C ESQ 200 SOUTH BISCAYNE BLVD, SUITE 1800 MIAMI, FL 33131
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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.

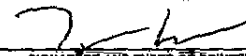
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable

FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	U000000346945 04/30/05-80095-020 150.00
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TD HAYWORTH, STEVEN D 1300 ALFONSO AVENUE MIAMI, FL 33146
TITLE NAME STREET ADDRESS CITY - ST - ZIP	C DAVID KIRLAND 235 WELLS RD PALM BEACH, FL 33480
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D DYKE, JAMES T 309 CENTER ST LITTLE ROCK, AR 72201
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D KRAMER, TERRY A 137 MURRAY LANE SOUTH HAMPTON, NY 11768
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S CARON, TONY 1060 SE 6 COURT DANIA, FL 33004
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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, with all other like empowered.

SIGNATURE:  **Tony Caron** 4/26/05 (305) 476-5502
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #