

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000040945

Entity Name: GULF SMOKED SEAFOOD, INC.

FILED  
Mar 25, 2009  
Secretary of State

## Current Principal Place of Business:

103 S. EHRMANN STREET  
PENSACOLA, FL 32507 US

## New Principal Place of Business:

## Current Mailing Address:

103 S. EHRMANN STREET  
PENSACOLA, FL 32507 US

## New Mailing Address:

2706 GLEN OAK CIRCLE  
GULF BREEZE, FL 32563 US

FEI Number: 59-3252627

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MCAUSLAND, SHAWNA  
103 S. EHRMANN STREET  
PENSACOLA, FL 32507 US

## Name and Address of New Registered Agent:

MCAUSLAND, SHAWNA  
2706 GLEN OAK CIRCLE  
GULF BREEZE, FL 32563 US

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.

SIGNATURE:

03/25/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: MCAUSLAND, SHAWNA  
Address: 103 S. EHRMANN STREET  
City-St-Zip: PENSACOLA, FL 32507

Title: T ( ) Delete  
Name: BYDALEK, MELINDA  
Address: 103 S. EHRMANN STREET  
City-St-Zip: PENSACOLA, FL 32507

Title: S (X) Delete  
Name: DOMULOT, MARSHA  
Address: 103 S. EHRMANN STREET  
City-St-Zip: PENSACOLA, FL 32507

Title: VP (X) Delete  
Name: MCAUSLAND, ANDREW  
Address: 103 S. EHRMANN STREET  
City-St-Zip: PENSACOLA, FL 32507

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: MCAUSLAND, SHAWNA  
Address: 2706 GLEN OAK CIRCLE  
City-St-Zip: GULF BREEZE, FL 32563

Title: VP (X) Change ( ) Addition  
Name: MCAUSLAND FOSTER, ANDREW  
Address: 2706 GLEN OAK CIRCLE  
City-St-Zip: GULF BREEZE, FL 32563

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
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: SHAWNA MCAUSLAND

P

03/25/2009

Electronic Signature of Signing Officer or Director

Date