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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P94000068626 (8)**

1. Corporation Name

GULFSTREAM TRADING COMPANY, INC.

Principal Place of Business	Mailing Address
1512 CATHERINE STREET KEY WEST FL 33040	1512 CATHERINE STREET KEY WEST FL 33040

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 09/19/1994
3a. Date of Last Report: N/A

2. Principal Place of Business
21: 118 Brushwood LN.
22: Suite, Apt. #, etc.
23: City & State: Palm Coast, FL. 32137
24: Zip: 32137
25: Country: Flagler

2a. Mailing Address
26: 830-13 A1A N.
27: Suite 306
28: City & State: Ponte Vedra Bch, FLA.
29: Zip: 32082
30: Country: St. Johns

4. FEI Number: 58-213-2576 ☐ Applied For ☐ Not Applicable

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

6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under § 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

REEB, EDWARD L
1512 CATHERINE STREET
KEY WEST FL 33040

10. Name and Address of New Registered Agent

81 Name: William A. Dunn
82 Street Address (P.O. Box Number is Not Acceptable): 118 Brushwood Lane
83 City: Palm Coast
84 FL 85 Zip Code: 32137

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: William A Dunn — William A. Dunn-Vice Pres. Dir. 7/1/95
(Signature, typed or printed name of registered agent and title if applicable) (Date)
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	11 TITLE	☒ Change ☐ Addition — P
NAME	DUNN, ANGELA LEE	12 NAME	Dunn, Angela L.
STREET ADDRESS	13 NORTHLAKE DRIVE	13 STREET ADDRESS	118 Brushwood LN.
CITY ST ZIP	STATESBORO GA 30458	14 CITY ST ZIP	Palm Coast, FL. 32137
TITLE	V	21 TITLE	☒ Change ☐ Addition — Dunn, William A. Director & V.P.
NAME	DUNN, WILLIAM A	22 NAME	
STREET ADDRESS	13 NORTHLAKE DRIVE	23 STREET ADDRESS	118 Brushwood LN.
CITY ST ZIP	STATESBORO GA 30458	24 CITY ST ZIP	Palm Coast, FL 32137
TITLE	D	31 TITLE	☒ Change ☐ Addition — Edward Reeb - no longer Director or registered agent.
NAME	REEB, EDEARD L	32 NAME	
STREET ADDRESS	12307 MANDERIN MEADOWS DR. EAST	33 STREET ADDRESS	William A. Dunn, Palm Coast, FL.
CITY ST ZIP	JACKSONVILLE FL 32223	34 CITY ST ZIP	118 Brushwood LN,
TITLE		41 TITLE	☐ Change ☐ Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY ST ZIP		44 CITY ST ZIP	000001533930
TITLE		51 TITLE	-07/10/95--01088-003 ☐ Addition
NAME		52 NAME	****225.00 ****225.00
STREET ADDRESS		53 STREET ADDRESS	
CITY ST ZIP		54 CITY ST ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	SSJ 7/5/95
STREET ADDRESS		63 STREET ADDRESS	
CITY ST ZIP		64 CITY ST ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Angela L. Dunn — Angela L. Dunn 7/1/95 904-446-4748
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR (Date) (Daytime Phone #)

0100384 CP