

# **2011 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P95000040352

**FILED**  
**Nov 23, 2011**  
**Secretary of State**

**Entity Name:** GULF BREEZE PAINTING, INC.

**Current Principal Place of Business:**

1119 FARRAGUT DR N  
ST PETERSBURG, FL 33710 US

**New Principal Place of Business:**

**Current Mailing Address:**

1119 FARRAGUT DR N  
ST PETERSBURG, FL 33710 US

**New Mailing Address:**

**FEI Number:** 59-3314048      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

COYLE, THOMAS M  
1119 FARRAGUT DR N  
SAINT PETERSBURG, FL 33710 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PST  
Name: COYLE, THOMAS M  
Address: 1119 FARRAGUT DR. N.  
City-St-Zip: ST PETERSBURG, FL 33710

Title: V  
Name: CONNER, TROY  
Address: 6740 GULF PORT BLVD. S..  
City-St-Zip: SOUTH PASADENA, FL 33707

Title: V  
Name: LEWIS, JEFFREY M  
Address: 6125 9TH AVENUE S.  
City-St-Zip: GULFPORT, FL 33710

I hereby 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 all other like empowered.

SIGNATURE: THOMAS M. COYLE

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11/23/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date