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May 28 1997 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1996

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



DOCUMENT # P 95000040948  
1. Corporation Name  
Gulf States Holdings, Corp.

Principal Place of Business Mailing Address (same)  
6747-4 Cape Hatteras Way N.E.  
St. Peter, FL 33702

2. Principal Place of Business 2a. Mailing Address  
21 6747-4 Cape Hatteras Way N.E. 26 Same  
Suite, Apt. #, etc. Suite, Apt. #, etc.  
22 City & State 27 City & State  
23 St. Petersburg 28  
Zip Country Zip Country  
24 FL 25 U.S.A. 29 30

3. Date Incorporated or Qualified 3a. Date of Last Report  
5-24-95 May 1, 1996  
4. FEI Number Applied For  
59-3351113 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 s. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent  
David A. Meyer  
150 2nd Ave. N. Suite 1600  
St. Petersburg, FL 33701

10. Name and Address of New Registered Agent  
81 Name Robert J. Andringa  
82 Street Address (P.O. Box Number is Not Acceptable)  
6747-4 Cape Hatteras Way N.E.  
83  
84 City St. Petersburg FL 85 Zip Code 33702

11. Pursuant to the provisions of Sections 807.0502 and 807.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent 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 807.0505, Florida Statutes.

SIGNATURE Robert J. Andringa  
Signature, typed or printed name of registered agent and date, if applicable. (NOTE: Registered Agent signature required when re-registering.) DATE

12. OFFICERS AND DIRECTORS  
NAME David A. Meyer ☐ DELETE  
STREET ADDRESS President  
CITY-ST-ZIP  
TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  
1.1 TITLE President ☒ Change ☐ Addition  
1.2 NAME David A. Meyer  
1.3 STREET ADDRESS 6747-4 Cape Hatteras Way N.E.  
1.4 CITY-ST-ZIP St. Peter, FL 33702  
2.1 TITLE Robert Watkins ☐ Change ☐ Addition  
2.2 NAME - Vice President  
2.3 STREET ADDRESS (same as 1.3 + 1.4)  
2.4 CITY-ST-ZIP  
3.1 TITLE Secretary / Treasurer ☐ Change ☐ Addition  
3.2 NAME Robert J. Andringa  
3.3 STREET ADDRESS (same as 1.3 + 1.4)  
3.4 CITY-ST-ZIP  
4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP  
5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP  
6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 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(2)(k), 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: Robert J. Andringa Secretary / Treasurer 4-29-97 (813) 527-5972  
Signature AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #