

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 06, 2008 08:00 A
Secretary of State

DOCUMENT # P96000016661

1. Entity Name
GULF ATLANTIC MARKETING GROUP, INC.



Principal Place of Business
**14113 YELLOW WOOD CIRCLE
ORLANDO, FL 32828**

Mailing Address
**1344 MEDITERRANEAN DRIVE
SUITE 132
PUNTA GORDA, FL 33950**



01112008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3363137

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**PENNINGTON, ROBERT A.
1344 MEDITERRANEAN DR.
SUITE 132
PUNTA GORDA, FL 33950**

**DO NOT WRITE
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

000000817368
02/14/08-80088-022 150.00

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P PENNINGTON, ROBERT A 1530 CARILLON PARK DRIVE OVIEDO, FL 32765
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST PENNINGTON, SANDRA K 1530 CARILLON PARK DRIVE OVIEDO, FL 32765
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP BRANDENBURG, ROBERTA A 14113 YELLOW WOOD CIRCLE ORLANDO, FL 32828
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 either like empowered.

SIGNATURE:

Robert A. Pennington
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNED OFFICER OR DIRECTOR

Feb 4, 2008 407-312-2000
Date Daytime Phone #