


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 07, 2005 08:00 AM
Secretary of State

DOCUMENT # P960000334,17 1. Entity Name GULF TO BAY ENTERPRISES, INC.	
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Principal Place of Business 15436 MORGAN STREET CLEARWATER, FL 33760	Mailing Address 15436 MORGAN STREET CLEARWATER, FL 33760
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01042005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3409829	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

THORTON, CHRISTOPHER
15436 MORGAN STREET
CLEARWATER, FL 33760

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: *Chris Shenth* DATE: 1-4-05

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V OSTERMAN, JOHN R 3097 MISSION GROVE DR. #1A PALM HARBOR, FL 34684
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P THORNTON, CHRIS 15436 MORGAN ST CLEARWATER, FL 33760
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST SPENCER, LAURIE 15436 MORGAN ST CLEARWATER, FL 33760
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 all other like empowered.

SIGNATURE: *Chris Shenth* DATE: 1-4-05 DAYTIME PHONE #: 727-639-1516

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR