FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

🚁 🗸 PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000044088

1. Corporation Name

GULFSIDE CONSTRUCTION COMPANY, INC.

Principal Place of Busines	5
20004 H.C. 40 MODTH	

FILED Apr 29, 1999 8:00 am Secretary of State

04-29-1999 90231 047 ***150.00



Principal Place	of Business	Mailing Address							
19964 U.S. 19 NORTH PARPON SPRINGS FL 34689		POST OFFICE BOX 358 TARPON SPRINGS FL 34688-0358				DO NOT WRITE IN THIS SPACE	•		
						3. Date Incorporated or Qualifed 05/23/1996			
2. Principal Pla	ce of Business	2a. Mailing Addre	ess			4. FEI Number Applied	For		
	· · · · · · · · · · · · · · · · · · ·	26				59-3386204 Not Appl	licable		
-Suite, Apt. #, etc.			Suite, Apt. #, etc.			E Cortificate of Status Desired	\$8.75 Additional Fee Required		
City & State		City & State			· _	6. Election Campaign Financing Trust Fund Contribution Added to Fee			
Zip 4	Country 25	Zip 29	Cou 30	ntry		8. This corporation owes the current year Intangible Personal Property Tax.)		
-1,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	9. Name and Address of Curr	rent Registered Agent		10. Name and Address of New Registered Agent					
RAVELING, ALLAN G			81	Name					
2680 HUNT ROAD		82	Street Address (P.O. Box Number is Not Acceptable)						
TARP	ON SPRINGS FL 34689			83					
				84	City	FL 85 Zip Code			
11. Pursuant to office or re	the provisions of Sections 607.0 gistered agent, or both, in the Sta	502 and 607.1508, Flori te of Florida. Such chan	da Statutes, the al ge was authorized	bove by t	named corporati	proration submits this statement for the purpose of changing its regist ation's board of directors. I hereby accept the appointment as register	tered ed		

agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE	Signature, typed or printed name of registered agent and title if applicable. (NOTE:	Registered Agent signature requi	ired when rejustation) DATE			
12,	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	PVST DELETE	1.1 TITLE	Change	Addition		
NAME	RAVELING, ALLAN G	1.2 NAME		Ì		
STREET ADDRESS	2680 HUNT RD	1.3 STREET ADDRESS		ł		
CITY-ST-ZIP	TARPON SPRINGS FL	1.4 CITY-ST-ZIP	·			
TITLE	☐ DELETE	2.1 TITLE	☐ Change	☐ Addition		
NAME		2.2 NAME				
STREET ADDRESS		. 2.3 STREET ADDRESS		_		
CITY-ST-ZIP		2. 4 CITY-ST-ZIP				
TITLE	☐ DELETE	3.1 TITLE	☐ Change	Addition		
NAME		3.2 NAME				
STREET ADDRESS		3.3 STREET ADDRESS				
CITY-ST-ZIP		3.4. CITY+ST-ZIP				
TITLE	☐ DELETE	4.1 TITLE	☐ Change	☐ Addition		
NAME		4.2 NAME	•			
STREET ADDRESS		4.3 STREET ADDRESS	·			
CITY-ST-ZIP	<u>·</u>	4.4 CITY-ST-ZIP				
TITLE	☐ DELETE	5.1 TITLE	☐ Change	☐ Addition		
NAME		5.2 NAME				
STREET ADDRESS	•	5.3 STREET ADDRESS	·			
CITY-ST-ZIP		5.4 CITY-ST-ZIP				
TITLE	DELETE	6.1 TITLE	☐ Change	☐ Addition		
NAME		6.2 NAME				
STREET ADDRESS		6.3 STREET ADORESS				
CITY-ST-7IP		6.4 CITY-ST-ZIP .				

14. I hereby certify that the information supplied with this filing 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, opportunity with an address, with all other like empowered.

SIGNATURE: