

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000004180

Entity Name: GULF COAST NU-GLAZE, INC.

FILED
Apr 12, 2006
Secretary of State

Current Principal Place of Business:

1872 BAY OAKS CIR
MILTON, FL 32583

New Principal Place of Business:

Current Mailing Address:

1872 BAY OAKS CIR
MILTON, FL 32583

New Mailing Address:

FEI Number: 59-3417284

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILMOTH, MARY H
1872 BAY OAKS CIRCLE
MILTON, FL 32583 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: WILMOTH, JONATHAN N
Address: 1872 BAY OAKS CIR
City-St-Zip: MILTON, FL 32583

Title: SD () Delete
Name: WILMOTH, MARY H
Address: 1872 BAY OAKS CIR
City-St-Zip: MILTON, FL 32583

Title: VD () Delete
Name: WILMOTH, LUCAS N
Address: 1872 BAY OAKS CIR
City-St-Zip: MILTON, FL 32583

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VD (X) Change () Addition
Name: WILMOTH, LUCAS N
Address: 10025 HILLVIEW DRIVE APT. 6
City-St-Zip: PENSACOLA, FL 32514

Title: VD () Change (X) Addition
Name: MARSHALL, DAVID L
Address: 4685 GENEVA DRIVE
City-St-Zip: PENSACOLA, FL 32526

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: MARY H. WILMOTH

SD

04/12/2006

Electronic Signature of Signing Officer or Director

Date