

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 05, 2004 8:00 am
Secretary of State

05-05-2004 90192 048 ***158.75

DOCUMENT # P97000049971

1. Entity Name
TESSERA GULFSTREAM, INC.



Principal Place of Business
**1819 MAIN STREET
STE 200
SARASOTA, FL 34236**

Mailing Address
**7800 BAYBERRY ROAD
JACKSONVILLE, FL 32256**

64070300



04272004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0763167

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

~~SURLEY, DAVID~~ *Christine Gibson*
~~535 S. PALM AVE.~~ *Tessera Gulfstream, Inc.*
~~1819 MAIN STREET, SUITE 200~~
~~SARASOTA, FL 34236~~

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

Christine Gibson, VP
(NOTE: Registered Agent signature required when reinstating)

04/27/2004
DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	CLABAUGH, JAMES E
STREET ADDRESS	1819 MAIN STREET, STE 200
CITY-ST-ZIP	SARASOTA, FL 34236
TITLE	DVAS
NAME	FULLERTON, ROBERT C
STREET ADDRESS	7800 BAYBERRY ROAD
CITY-ST-ZIP	JACKSONVILLE, FL 32256
TITLE	VS
NAME	GIBSON, CHRISTINE
STREET ADDRESS	1819 MAIN STREET, STE 200
CITY-ST-ZIP	SARASOTA, FL 34236
TITLE	V
NAME	MCCULLOUGH, PAMELA
STREET ADDRESS	1819 MAIN STREET, STE 200
CITY-ST-ZIP	SARASOTA, FL 34236
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 exemption stated in Section 119.07(3)(i), 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 *Christine Gibson*

Christine Gibson
V-P

04/27/2004
04/27/2004