2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000064796

5525 SAND LAKE DR.

MELBOURNE, FL 32934

Address: City-St-Zip:

Entity Name: DOUG GULICK CONSTRUCTION, INC.

FILED Jan 16, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 4155 DOW RD 658 ATLANTIS RD UNIT J SUITE 107 MELBOURNE, FL 32934 MELBOURNE, FL 32904 **Current Mailing Address: New Mailing Address:** 658 ATLANTIS RD 4155 DOW RD SUITE 107 **UNIT J** MELBOURNE, FL 32934 MELBOURNE, FL 32904 FEI Number: 59-3459893 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: GOFF-GULICK, BELINDA GOFF-GULICK, BELINDA 4155 DOW RD 658 ATLANTIS RD UNIT J SUITE 107 MELBOURNE, FL 32934 US MELBOURNE, FL 32904 US 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: BELINDA GOFF GULICK 01/16/2009 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition GULICK, DOUGLAS C. Name: Name: 5525 SAND LAKE DR. Address: Address: City-St-Zip: MELBOURNE, FL 32934 City-St-Zip: Title: VΡ () Delete Title: () Change () Addition GOFF-GULICK, BELINDA Name: Name: 5525 SAND LAKE DR. Address: Address: MELBOURNE, FL 32934 City-St-Zip: City-St-Zip: Title: Title: () Delete () Change () Addition GOFF-GULICK, BELINDA Name: Name:

I hereby certify that the information supplied with this filing does not qualify 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.

Address:

City-St-Zip:

SIGNATURE: BELINDA GOFF GULICK VP 01/16/2009