

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P97000080310

**Entity Name:** GULF SCAPES, INC.

**FILED**  
**Apr 28, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

204 NAVARRE STREET  
GULF BREEZE, FL 32561

**New Principal Place of Business:**

**Current Mailing Address:**

313 BELLWOOD RD.  
WEST MIFFLIN, PA 15122

**New Mailing Address:**

**FEI Number:** 59-3504031

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

ATKINSON, KATHY  
4537 HICKORY SHORES BLVD  
GULF BREEZE, FL 32561 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

**OFFICERS AND DIRECTORS:**

Title: PTD  
Name: BERNOSKY, PAMELA A.  
Address: 313 BELLWOOD ROAD  
City-St-Zip: WEST MIFFLIN, PA 15122

Title: SC  
Name: BERNOSKY, THOMAS J.  
Address: 313 BELLWOOD ROAD  
City-St-Zip: WEST MIFFLIN, PA 15122

Title: D  
Name: BERNOSKY, VIRGINIA  
Address: 313 BELLWOOD ROAD  
City-St-Zip: WEST MIFFLIN, PA 15122

I hereby 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 all other like empowered.

SIGNATURE: THOMAS J BERNOSKY

SC

04/28/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date