

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000080584

Entity Name: GULF SHRIMP, INC.

FILED
Feb 18, 2004
Secretary of State

Current Principal Place of Business:

1300 MAIN STREET
FORT MYERS BEACH, FL 33931

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 2490
FT MYERS BEACH, FL 33932

New Mailing Address:

FEI Number: 65-0785218

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HENDERSON, DENNIS
5790 BRIARCLIFF RD.
FORT MYERS, FL 33912 US

Name and Address of New Registered Agent:

HENDERSON, DENNIS
21251 CARTER
ESTERO, FL 33928 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: DENNIS L. HENDERSON

02/18/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: JENSEN, HUBERT
Address: 1100 MAIN ST.
City-St-Zip: FT MYERS BEACH, FL 33932

Title: VP () Delete
Name: HENDERSON, DENNIS
Address: 21251 CARTER RD.
City-St-Zip: ESTERO, FL 33928

Title: S () Delete
Name: GALA, GEORGE JR
Address: 7227 HENDRY CREEK DR.
City-St-Zip: FT MYERS, FL 33908

Title: T () Delete
Name: ERICKSON, GRANT
Address: 1100 MAIN ST
City-St-Zip: FT MYERS BEACH, FL 33932

Title: D () Delete
Name: ERICKSON, CARL C
Address: 1100 MAIN ST
City-St-Zip: FT MYERS BEACH, FL 33932

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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 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: GEORGE GALA

S

02/18/2004

Electronic Signature of Signing Officer or Director

Date