

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000080584

Entity Name: GULF SHRIMP, INC.

FILED  
Feb 29, 2008  
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  
21251 CARTER  
ESTERO, FL 33928 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: 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 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: DENNIS L HENDERSON

VP

02/29/2008

Electronic Signature of Signing Officer or Director

Date