2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P98000066583

Address

City-St-Zip:

Entity Name: GULFSHORE IT SOLUTIONS, INCORPORATED

Apr 23, 2002 8:00 AM Secretary of State

Current Principal Place of Business: New Principal Place of Business: 9525 ACORN LANE 4400 BAYOU BLVD NAVARRE, FL 32566 54-A PENSACOLA, FL 32503 US **Current Mailing Address:** New Mailing Address: PO BOX 30480 9525 ACORN LANE NAVARRE, FL 32566 PENSACOLA, FL 32503 US FEI Number: 59-3534214 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: WHITE, JEFFREY L WHITE, JEFFREY L 9525 ACORN LANE 4400 BAYOU BLVD NAVARRE, FL 32566 US 54-A PENSACOLA, FL 32503 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: 04/23/2002 Electronic Signature of Registered Agent Date This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X). Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition WHITE, JEFFREY L WHITE, JEFFREY L Name: Name: 9525 ACORN LANE 4400 BAYOU BLVD #54-A Address: Address: City-St-Zip: NAVARRE, FL 32566 City-St-Zip: PENSACOLA, FL 32503 Title: Title: (X) Change () Addition () Delete Name: SPORE, KEVIN D Name: SPORE, KEVIN D 9525 ACORN LANE 4400 BAYOU BLVD #54-A Address: Address: NAVARRE, FL 32566 PENSACOLA, FL 32503 City-St-Zip: City-St-Zip: Title: () Delete Title: () Change (X) Addition Name: FIELDS, LUANNE Name: 4400 BAYOU BLVD #54-A

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.

Address:

City-St-Zip:

PENSACOLA, FL 32503

SIGNATURE: JEFFREY L WHITE 04/23/2002 D