

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000067196

FILED  
Apr 27, 2012  
Secretary of State

**Entity Name:** GULF ATLANTIC FUNDING GROUP, INC.

**Current Principal Place of Business:**

5400 SOUTH UNIVERSITY DRIVE #603  
BUILDING L  
DAVIE, FL 33328 US

**New Principal Place of Business:**

**Current Mailing Address:**

5400 SOUTH UNIVERSITY DRIVE #603  
BUILDING L  
DAVIE, FL 33328 US

**New Mailing Address:**

**FEI Number:** 65-0855140

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

EGAN, STEVEN M  
5400 SOUTH UNIVERSITY DRIVE #603  
BUILDING L  
DAVIE, FL 33328 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: P  
Name: EGAN, STEVEN M  
Address: 5400 S. UNIVERSITY DRIVE #603L  
City-St-Zip: DAVIE, FL 33328 US

Title: S  
Name: HYDE, DOLORES  
Address: 5400 S. UNIVERSITY DRIVE #603L  
City-St-Zip: DAVIE, FL 33328 US

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: STEVEN M. EGAN

P

04/27/2012

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

\_\_\_\_\_  
Date