

2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P99000017889

Entity Name: GULF COAST HOME SITES, INC.

FILED
Dec 13, 2007
Secretary of State

Current Principal Place of Business:

1531 S TAMiami TRAIL
#703
VENICE, FL 34285

New Principal Place of Business:

Current Mailing Address:

1531 S TAMiami TRAIL
#703
VENICE, FL 34285

New Mailing Address:

FEI Number: 65-1020756

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JACOBS, K
1531 S TAMiami TRAIL, #703
VENICE, FL 34285 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: D () Delete
Name: KHLEIF, AL
Address: 1531 S TAMiami TRAIL, #703
City-St-Zip: VENICE, FL 34285

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: P () Change (X) Addition
Name: KHLEIF, ALBERT
Address: 1531 TAMiami TR S #703
City-St-Zip: VENICE, FL 34285

Title: VP () Change (X) Addition
Name: JACOBS, EDGAR
Address: 1531 TAMiami TR S #703
City-St-Zip: VENICE, FL 34285

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: ALBERT KHLEIF

P

12/13/2007

Electronic Signature of Signing Officer or Director

Date