

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S47041

FILED  
Apr 06, 2010  
Secretary of State

**Entity Name:** GULFCOAST ACCOUNTING & TAX SERVICES, INC.

**Current Principal Place of Business:**

7985 113TH ST N  
SUITE 330  
SEMINOLE, FL 33772 US

**New Principal Place of Business:**

**Current Mailing Address:**

7985 113TH ST N  
SUITE 330  
SEMINOLE, FL 33772 US

**New Mailing Address:**

**FEI Number:** 59-3058568      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

GABLE, WILLIAM D JR  
7985 113TH ST N SUITE 330  
SEMINOLE, FL 33772 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: PRES  
Name: GABLE, RUTHANN M  
Address: 7985 113TH ST N SUITE 330  
City-St-Zip: SEMINOLE, FL 33772

Title: VP  
Name: GABLE, WILLIAM D JR  
Address: 7985 113TH ST N SUITE 330  
City-St-Zip: SEMINOLE, FL 33772

Title: S  
Name: GABLE, WILLIAM D JR  
Address: 7985 113TH ST N SUITE 330  
City-St-Zip: SEMINOLE, FL 33772

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: RUTHANN M GABLE

PRES

04/06/2010

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

\_\_\_\_\_ Date