

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S48571

Entity Name: GUMBO-LIMBO, INC.

FILED  
May 06, 2009  
Secretary of State

## Current Principal Place of Business:

2212 S FLORIDA AVE  
SUITE 400  
LAKELAND, FL 33803 US

## Current Mailing Address:

POB 3030  
LAKELAND, FL 33802 US

## New Principal Place of Business:

8178 LITTLE GASPARILLA ISLAND  
PLACIDA, FL 33946 US

## New Mailing Address:

PO BOX 3030  
LAKELAND, FL 33802 US

FEI Number: 59-3077460

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WILSON, CLAY  
2212 S FLORIDA AVE  
SUITE 400  
LAKELAND, FL 33803 US

## Name and Address of New Registered Agent:

JONES, FIONNUALA  
520 LONE PALM DR  
LAKELAND, FL 33815 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: FIONNUALA JONES

05/06/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: TS ( ) Delete  
Name: JONES, FIONNUALA  
Address: 520 LONE PALM DR  
City-St-Zip: LAKELAND, FL 33815

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

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

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

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: GOFF, KENNETH  
Address: 1817 SOUTH HIGHLAND PARK DR  
City-St-Zip: LAKE WALES, FL 33898 US

Title: VP ( ) Change (X) Addition  
Name: HOUGHTON, DEBORAH  
Address: 2306 CAMBRIDGE AVE  
City-St-Zip: LAKELAND, FL 33803 US

Title: T/S ( ) Change (X) Addition  
Name: JONES, FIONNUALA  
Address: 520 LONE PALM DR  
City-St-Zip: LAKELAND, FL 33815 US

Title: D ( ) Change (X) Addition  
Name: JONES, RANDY  
Address: 520 LONE PALM DR  
City-St-Zip: LAKELAND, FL 33815 US

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: FIONNUALA JONES

T/S

05/06/2009

Electronic Signature of Signing Officer or Director

Date