

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S94550

FILED
Jun 28, 2005
Secretary of State

Entity Name: THE GULFCOAST GABBER, INC.

Current Principal Place of Business:

1419 49TH STREET SOUTH
GULFPORT, FL 33707

New Principal Place of Business:

Current Mailing Address:

1419 49TH STREET SOUTH
GULFPORT, FL 33707

New Mailing Address:

FEI Number: 52-1756306

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DEW, JOHN C.
1419 49TH STREET SOUTH
GULFPORT, FL 33707 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: DPS () Delete
Name: NORTHROP, SALLY D
Address: 126 FAIRWAY LANDINGS DR.
City-St-Zip: CANONSBURG, PA 15317

Title: VD () Delete
Name: REICHART, DEBORAH
Address: 6301 33RD AVE. N.
City-St-Zip: ST. PETERSBURG, FL 33710

Title: VD () Delete
Name: REICHART, KEN
Address: 6301 33RD AVE. N.
City-St-Zip: ST. PETERSBURG, FL 33710

Title: TD () Delete
Name: PAVLOVIC, ROBERT
Address: 2355 WEST GATE DRIVE
City-St-Zip: PITTSBURGH, PA 15237

Title: BM () Delete
Name: NORTHROP, WILLIAM
Address: 126 FAIRWAY LANDINGS DR.
City-St-Zip: CANONSBURG, PA 15317

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPS (X) Change () Addition
Name: REICHART, KEN W
Address: 6301 33RD AVE N.
City-St-Zip: ST. PETERSBURG, FL 33710

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

Title: VD (X) Change () Addition
Name: NORTHROP, SALLY D
Address: 126 FAIRWAY LANDINGS DRIVE
City-St-Zip: CANONSBURG, PA 15317

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

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

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.

SIGNATURE: KENNETH W. REICHART

DPS

06/28/2005

Electronic Signature of Signing Officer or Director

Date