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CORPORATION  
ANNUAL REPORT  
1995



FLORIDA DEPARTMENT OF STATE  
CORPORATION DIVISION  
TALLAHASSEE, FLORIDA 32399-0001

APPROVED  
AND  
FILED

05 MAY -1 AM 8:23

DOCUMENT # S97795

(6)

1. Corporation Name

GULFSHORE CONSTRUCTION, INC.

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

(DO NOT WRITE IN THIS SPACE)

Principal Place of Business: 4055 TAMiami TrL  
STE 5  
PT CHARLOTTE FL 33952  
US

Mailing Address: 4055 TAMiami TrL  
STE 5  
PT CHARLOTTE FL 33952  
US

3. Date Inc. Corporated or Qualified: 12/02/1991  
3a. Date of Last Report: 04/20/1994

2. Principal Place of Business: 21  
2b. Mailing Address: 26

4. FEI Number: 65-0296662  
Applied For: Not Applicable

21. State Apt. # etc.: 22  
27. State Apt. # etc.: 27

5. Certificate of Status Desired: ☒ \$8.75 Additional Fee Required

23. City & State: 24  
28. City & State: 28

6. Election Campaign Financing: ☐ \$5.00 May Be Added to Fees  
7. This corporation has liability for intangible tax under s. 193.032, Florida Statutes: ☒ Yes ☐ No

24. City: 25. County: 29. City: 30. County:

## 9. Name and Address of Current Registered Agent

HOCHSTETLER, DENNIS  
4055 TAMiami TrL  
STE #5  
PT. CHARLOTTE FL 33983

## 10. Name and Address of New Registered Agent

81. Name:  
82. Street Address (P.O. Box Number is Not Acceptable):  
83.  
84. City: FL 85. Zip Code:

11. Pursuant to the provisions of Sections 607.05(2) and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.05(2), Florida Statutes.

SIGNATURE

(Signature of Current Registered Agent is Required)

(Signature of Registered Agent is Not Required)

## 12. OFFICERS AND DIRECTORS

1. NAME: D HOCHSTETLER, DENNIS  
2. STREET ADDRESS: 785 IVANHOE ST  
3. CITY & STATE: PORT CHARLOTTE FL  
4. NAME: D HOCHSTETLER, A. RENEE  
5. STREET ADDRESS: 785 IVANHOE ST  
6. CITY & STATE: PORT CHARLOTTE FL  
7. NAME:  
8. STREET ADDRESS:  
9. CITY & STATE:  
10. NAME:  
11. STREET ADDRESS:  
12. CITY & STATE:  
13. NAME:  
14. STREET ADDRESS:  
15. CITY & STATE:

## 13. ADDITIONAL NAMES TO OFFICERS AND DIRECTORS

1. NAME: ☐ Change ☐ Add  
2. NAME: ☐ Change ☐ Add  
3. NAME: ☐ Change ☐ Add  
4. NAME: ☐ Change ☐ Add  
5. NAME: ☐ Change ☐ Add  
6. NAME: ☐ Change ☐ Add  
7. NAME: ☐ Change ☐ Add  
8. NAME: ☐ Change ☐ Add  
9. NAME: ☐ Change ☐ Add  
10. NAME: ☐ Change ☐ Add  
11. NAME: ☐ Change ☐ Add  
12. NAME: ☐ Change ☐ Add  
13. NAME: ☐ Change ☐ Add  
14. NAME: ☐ Change ☐ Add  
15. NAME: ☐ Change ☐ Add

14. I hereby certify that the information required with this filing is voluntarily furnished and is true and correct and that my signature shall have the same legal effect as if made on the date that this information is filed with the corporation or the receiver or trustee organized to carry out the report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13, as changed, on every subsequent filing with the office.

SIGNATURE:

*Dennis Hochstetler*

DENNIS HOCHSTETLER 4-28-95 (813) 625-1233