

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V02742

FILED  
May 01, 2007  
Secretary of State

**Entity Name:** GULFSTREAM WEST INVESTMENTS, INC.

**Current Principal Place of Business:**

PO BOX 606  
KINGWOOD, WV 26537

**New Principal Place of Business:**

ROUTE 26 SOUTH  
KINGWOOD, WV 26537

**Current Mailing Address:**

PO BOX 606  
KINGWOOD, WV 26537

**New Mailing Address:**

**FEI Number:** 65-0714955

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

COLON, ANN V  
437 CROFTON DRIVE  
OCOE, FL 34761 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Election Campaign Financing Trust Fund Contribution ( )**

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: BOYLE, WILLIAM G  
Address: 217 SEEMONT DRIVE  
City-St-Zip: KINGWOOD, WV 26537

Title: VS ( ) Delete  
Name: BOYLE, EDWARD P II  
Address: 85 VILLAGE PARK DRIVE  
City-St-Zip: MORGANTOWN, WV 26508

Title: T ( ) Delete  
Name: BISHOP, CHARLOTTE A  
Address: RT 1 BOX 265B  
City-St-Zip: KINGWOOD, WV 26537

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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 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:** EDWARD P. BOYLE II

VP

05/01/2007

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

\_\_\_\_\_  
Date