

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V02742

FILED
Mar 27, 2009
Secretary of State

Entity Name: GULFSTREAM WEST INVESTMENTS, INC.

Current Principal Place of Business:

ROUTE 26 SOUTH
KINGWOOD, WV 26537

New Principal Place of Business:

Current Mailing Address:

PO BOX 606
KINGWOOD, WV 26537

New Mailing Address:

FEI Number: 55-0714955

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
OCOOE, 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

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: S (X) Change () Addition
Name: BOYLE, EDWARD P II
Address: 85 VILLAGE PARK DRIVE
City-St-Zip: MORGANTOWN, WV 26508

Title: T (X) Change () Addition
Name: GOOD, DENISE A
Address: BERRY ST
City-St-Zip: TUNNELTON, WV 26444

Title: VP () Change (X) Addition
Name: BOYLE, JOHN P II
Address: 15 WATERSIDE DR
City-St-Zip: MORGANTOWN, WV 26505

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: DENISE A GOOD

T

03/27/2009

Electronic Signature of Signing Officer or Director

Date