

**2022 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 646454

**Entity Name:** PEN GULF, INC.**Current Principal Place of Business:**1402 WEST ZARRAGOSSA STREET  
PENSACOLA, FL 32502**Current Mailing Address:**1402 WEST ZARRAGOSSA STREET  
PENSACOLA, FL 32502 US**FEI Number:** 59-1953552**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**COX, NANCY R.  
1402 ZARRAGOSSA STREET  
PENSACOLA, FL 32502 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:**\_\_\_\_\_  
Electronic Signature of Registered Agent\_\_\_\_\_  
Date**Officer/Director Detail :**

Title	CEO/PRESIDENT
Name	COX, CHRIS
Address	1402 WEST ZARRAGOSSA STREET
City-State-Zip:	PENSACOLA FL 32502

Title	SECRETARY
Name	WADE, GARY
Address	3705 HIDDEN OAK DRIVE
City-State-Zip:	PENSACOLA FL 32504

Title	CFO/TREASURER
Name	WADE, GARY
Address	3705 HIDDEN OAK DRIVE
City-State-Zip:	PENSACOLA FL 32504

Title	DIRECTOR
Name	COX, NANCY R.
Address	4810 MANOLETE
City-State-Zip:	PENSACOLA FL 32504

Title	DIRECTOR
Name	COX, CONSTANCE E.
Address	1402 WEST ZARRAGOSSA STREET
City-State-Zip:	PENSACOLA FL 32502

*I hereby 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 all other like empowered.*

**SIGNATURE:** GARY WADE**TREASURER****01/25/2022**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date