

1.) CORPORATION NAME: PEN GULF, INC.	DUE DATE: 2/28/2013
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: CT CORPORATION SYSTEM 4701 COX RD STE 301 GLEN ALLEN, VA	SCC ID NO: F0361891
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: HENRICO COUNTY	5.) STOCK INFORMATION CLASS <input type="text"/> AUTHORIZED <input type="text"/>
4.) STATE OR COUNTRY OF INCORPORATION: FL	

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 1402 WEST ZARRAGOSSA STREET

CITY/ST/ZIP: PENSACOLA, FL 32501

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME: NANCY R. COX TITLE: PRESIDENT ADDRESS: 4810 MANOLETE CITY/ST/ZIP/CO: PENSACOLA, FL 32504	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
NAME: CHRISTOPHER K COX TITLE: VICE PRESIDENT ADDRESS: 4401 CHULA VISTA CITY/ST/ZIP/CO: PENSACOLA, FL 32504	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
NAME: DAVID D. DORMAN TITLE: VICE PRESIDENT ADDRESS: 3090 CHATATA VALLEY ROAD CITY/ST/ZIP/CO: CHARLESTON, TN 37310	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
NAME: GARY WADE TITLE: SE ADDRESS: 3705 HIDDEN OAK DRIVE CITY/ST/ZIP/CO: PENSACOLA, FL 32504	<input checked="" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR

I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

/s/ NANCY R. COX	NANCY R. COX, PRESIDENT	4/8/2013
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	DATE

It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.