

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 30, 2002 8:00 am
Secretary of State

01-30-2002 90115 013 ****61.25

DOCUMENT # 755050
 1. Entity Name
THE GULF COAST SHELL CLUB, INC.

Principal Place of Business % ROBERT C GRANDA 925 ROSEMONT DRIVE PANAMA CITY FL 32405	Mailing Address % ROBERT C GRANDA 925 ROSEMONT DRIVE PANAMA CITY FL 32405
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 59-2103283	<input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**GRANDA, ROBERT C
 925 ROSEMONT DRIVE
 PANAMA CITY FL 32405**

7. Name and Address of New Registered Agent

Name _____
 Street Address (P.O. Box Number is Not Acceptable) _____
 City **FL** Zip Code _____

8. 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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> Delete
NAME	GRANDA, ROBERT C	
STREET ADDRESS	925 ROSEMONT DR	
CITY-ST-ZIP	PANAMA CITY FL 32405	
TITLE	VD	<input type="checkbox"/> Delete
NAME	GWEN, LAURENCE	
STREET ADDRESS	31 WEST BALDWIN RD	
CITY-ST-ZIP	PANAMA CITY FL 32405	
TITLE	TD	<input type="checkbox"/> Delete
NAME	BRUNNER, JIM	
STREET ADDRESS	7102 DEAURRECOECHEA	
CITY-ST-ZIP	SOUTH PORT FL 32409	
TITLE	SD	<input type="checkbox"/> Delete
NAME	BRUNNER, LINDA	
STREET ADDRESS	7102 DEAURRECOECHEA	
CITY-ST-ZIP	SOUTHPORT FL 32409	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Joseph James Brunner* **Joseph James Brunner** 01/19/02 872-4500

CR2E037 (9/01)