## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F94000005697

City-St-Zip:

MOBILE, AL 36617

FILED Jul 24, 2006 Secretary of State

Entity Name: GOODWILL INDUSTRIES/EASTER SEALS OF THE GULF COAST, INC.

**Current Principal Place of Business: New Principal Place of Business:** 2448 GORDON SMITH DR MOBILE, AL 36617 **Current Mailing Address: New Mailing Address:** 2448 GORDON SMITH DR MOBILE, AL 36617 FEI Number: 63-0363472 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HARKINS, FRANK 15 E. BRENT LANE PENSACOLA, FL 32503 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change ( ) Addition () Delete LADD, ALLEN MCMAKEN, MIKE Name: Name: P.O. BOX 6989 Address: 205 GOVERNMENT ST. COURTROOM #4100 Address: City-St-Zip: MOBILE, AL 36660 City-St-Zip: MOBILE, AL 36644 Title: VC Title: (X) Change ( ) Addition () Delete Name: LUCE, ROBIN Name: MELTON, RON Address: 1939 DAUPHIN ISLAND PKWY Address: 2551 MUIR WOODS COURT, S. City-St-Zip: MOBILE, AL 36605 City-St-Zip: MOBILE, AL 36693 Title: () Delete Title: (X) Change ( ) Addition KINTZ, MICHAEL Name: DOUGLAS, BOYD Name: Address: P.O. BOX 6237 Address: 3720 KENTAN DR. City-St-Zip: MOBILE, AL 36660 City-St-Zip: MOBILE, AL 36608 Title: ( ) Delete Title: (X) Change ( ) Addition MASSEY, RENEE Name: Name: MASSEY, RENEE P.O. BOX 600 Address: Address: P.O. BOX 1029 City-St-Zip: CHATOM, AL 36518 City-St-Zip: BAY MINETTE, AL 36507 Title: () Delete Title: () Change () Addition HARKINS, FRANK Name: Name: 2448 GORDON SMITH DR. Address: Address:

I hereby certify that the information supplied with this filing does not qualify for the 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

City-St-Zip:

SIGNATURE: FRANK HARKINS P 07/24/2006