

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F94000005697

FILED
Jan 28, 2009
Secretary of State

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

Current Principal Place of Business:

2448 GORDON SMITH DR
MOBILE, AL 36617

New Principal Place of Business:

Current Mailing Address:

2448 GORDON SMITH DR
MOBILE, AL 36617

New Mailing Address:

FEI Number: 63-0363472

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HARKINS, FRANK
15 E. BRENT LANE
PENSACOLA, FL 32503 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

OFFICERS AND DIRECTORS:

Title: CB () Delete
Name: MELTON, RON
Address: 2551 MUIR WOODS COURT, S.
City-St-Zip: MOBILE, AL 36693

Title: VC () Delete
Name: DOUGLAS, BOYD JR
Address: 3720 KENTAN DR.
City-St-Zip: MOBILE, AL 36608

Title: T () Delete
Name: LADD, BRADFORD
Address: 64 N. NORTH ROYAL ST.
City-St-Zip: MOBILE, AL 36602

Title: S () Delete
Name: BELL, RAYMOND JR
Address: P.O. BOX 1932
City-St-Zip: MOBILE, AL 36633

Title: P () Delete
Name: HARKINS, FRANK
Address: 2448 GORDON SMITH DR.
City-St-Zip: MOBILE, AL 36617

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

Title: COO () Change (X) Addition
Name: MCCAIN, JOHN
Address: 2448 GORDON SMITH DR.
City-St-Zip: MOBILE, AL 36617

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOHN MCCAIN

COO

01/28/2009

Electronic Signature of Signing Officer or Director

Date