2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2009
Secretary of State

DOCUMENT# N04000005092

Entity Name: GULFSHORE PLAYHOUSE, INC.

Current Principal Place of Business:

9130 GALLERIA COURT
#103
NAPLES, FL 34109

New Principal Place of Business:

Current Mailing Address:

9130 GALLERIA COURT
#103
NAPLES, FL 34109

New Mailing Address:

FEI Number: 90-0178566 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

COURY, KRISTEN
9130 GALLERIA COURT
103
NAPLES, FL 34109 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: D/C ( ) Delete
Name: HARDEN, ROBERT
Address: 8787 BAY COLONY DRIVE
City-St-Zip: NAPLES, FL 34108

Title: D/P ( ) Delete
Name: COURY, KRISTEN
Address: 410 BAYFRONT PLACE #401
City-St-Zip: NAPLES, FL 341026466

Title: D/S ( ) Delete
Name: PASTOOR, SANDRA
Address: 4531 PRESCOTT DRIVE
City-St-Zip: NAPLES, FL 34119

Title: D ( ) Delete
Name: CAHNERS, ROBERT
Address: 2200 SHEEPSHEAD DRIVE
City-St-Zip: NAPLES, FL 34102

Title: D ( ) Delete
Name: HILL, BARBARA
Address: 340 MADISON COURT
City-St-Zip: FORT MYERS BEACH, FL 33931

Title: D ( ) Delete
Name: BEIGHTOL, JOANN
Address: 4731 BONITA BAY BOULEVARD
City-St-Zip: BONITA SPRINGS, FL 34134

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: D (X) Change ( ) Addition
Name: NORTMAN, JACK
Address: 4400 GULF SHORE BOULEVARD N
City-St-Zip: NAPLES, FL 34103

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: KRISTEN COURY PRES 04/29/2009

Electronic Signature of Signing Officer or Director — Date