2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 18, 2009
Secretary of State

DOCUMENT# N07000001813

Entity Name: GULF COAST CHILDREN SERVICES INC

Current Principal Place of Business:

3491 SOUTHWIND DR
GULF BREEZE, FL 32563

New Principal Place of Business:

Current Mailing Address:

3491 SOUTHWIND DR
GULF BREEZE, FL 32563

New Mailing Address:

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

KUVACH, TERRI
3491 SOUTHWIND DR
GULF BREEZE, FL 32563 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: P ( ) Delete
Name: KUVACH, TERRI
Address: 10470 IVYGATE TERRACE
City-St-Zip: JONESBORO, GA 30238

Title: S ( ) Delete
Name: RAWLS, IONA
Address: 1040 DECLARATION CT
City-St-Zip: MCDONOUGH, GA 30253

Title: VP ( ) Delete
Name: HARRIS, LACHELLE
Address: 15812 THROCKLEY AVE
City-St-Zip: CLEVELAND, OH 44128

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:

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: TERRI KUVACH PRES 03/18/2009

Electronic Signature of Signing Officer or Director — Date