


# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Feb 28, 2007 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # N39750</b> 1. Entity Name NATURE COAST LODGE #2502, INC.	
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Principal Place of Business C/O EUGENE GESSELLI P O BOX 5232 SPRING HILL FL 34611-5232 US	Mailing Address C/O EUGENE GESSELLI P O BOX 5232 SPRING HILL FL 34611-5232 US
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2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc. City & State Zip	3. Mailing Address Suite, Apt. #, etc. City & State Zip	4. FEI Number <b>59-3028513</b> Applied For Not Applicable
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1st MOORE CR2E037 (10/06)

6. Name and Address of Current Registered Agent <b>GESSELLI, ANNETTE</b> <b>8164 TEDBURN PARK</b> <b>SPRING HILL FL 34606</b>	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City
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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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when re-registering) \_\_\_\_\_ DATE \_\_\_\_\_

<b>FILE NOW: FEE IS \$61.25</b> <b>Due By May 1, 2007</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	<b>Make Check Payable to Florida Department of State</b>
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10. OFFICERS AND DIRECTORS	
TITLE	DT <input type="checkbox"/> Delete
NAME	MILLER, PATRICIA A
STREET ADDRESS	10172 LITTLEFIELD LANE
CITY- ST- ZIP	SPRING HILL FL 34608
TITLE	DS <input type="checkbox"/> Delete
NAME	GESSELLI, ANNETTE
STREET ADDRESS	8164 TEDBURN PARK
CITY- ST- ZIP	SPRING HILL FL 34606
TITLE	DP <input type="checkbox"/> Delete
NAME	GESSELLI, EUGENE
STREET ADDRESS	8164 TEDBURN PARK
CITY- ST- ZIP	SPRING HILL FL 34606
TITLE	DV <input type="checkbox"/> Delete
NAME	ILLIANO, ANDREW
STREET ADDRESS	11420 AMBOY STREET
CITY- ST- ZIP	SPRING HILL FL 34609
TITLE	DS <input type="checkbox"/> Delete
NAME	LICATA, CAROLANN
STREET ADDRESS	8175 WINDING OAK LANE
CITY- ST- ZIP	SPRING HILL FL 34606
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	U00000651910
CITY- ST- ZIP	03/09/07-80025-024 61.25
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 exemptions contained in Section 119, 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: Annette Gesselli ANNETTE Gesselli 2/23/07 352-596-9456