

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N02000004073

**Entity Name:** GULF COAST ARTISTS' ALLIANCE, INC.

**Current Principal Place of Business:**

2604 CENTRAL AVENUE  
SAINT PETERSBURG, FL 33712

**Current Mailing Address:**

2604 CENTRAL AVENUE  
SAINT PETERSBURG, FL 33712 US

**FEI Number:** 71-0888450

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

VIENNEAU, JUDITH A  
3501 40TH ST. N.  
SAINT PETERSBURG, FL 33713 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

**Officer/Director Detail :**

Title           DIRECTOR, TREASURER  
Name           VIENNEAU, JUDITH A  
Address        3501 40TH ST. N.  
City-State-Zip: SAINT PETERSBURG FL 33713

Title           D  
Name           CUMMINGS, MARIE  
Address        P.O. BOX 596  
City-State-Zip: DUNEDIN FL 34697

Title           D  
Name           EGGERT, NANCY  
Address        1670 BAYSHORE BLVD.  
City-State-Zip: DUNEDIN FL 34698

Title           D  
Name           EHRSAM, BOO  
Address        9000-50TH ST. N.  
City-State-Zip: PINELLAS PARK FL 33782

Title           DIRECTOR  
Name           RICHARDSON, JOHN  
Address        1200 BLUFFS CIR.  
City-State-Zip: DUNEDIN FL 34698

Title           DIRECTOR, SECRETARY  
Name           SHELTON, CAROLE  
Address        6118 SCHOONER WAY  
City-State-Zip: TAMPA FL 33615

Title           DIRECTOR  
Name           BUSH, PATRICIA LYNN  
Address        6001 65TH AVE. N.  
City-State-Zip: PINELLAS PARK FL 33781

Title           DIRECTOR  
Name           ROSEFELT, CAROLE  
Address        5530 80TH ST. N.  
                  APT. D105  
City-State-Zip: SAINT PETERSBURG FL 33709

*I hereby 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 all other like empowered.*

**SIGNATURE:** JUDITH A. VIENNEAU

**DIRECTOR**

**03/29/2024**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date