

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000008035

Entity Name: GULF COAST CITIZEN DIPLOMACY COUNCIL, INC.**Current Principal Place of Business:**223 PALAFOX PLACE
ROOM 200
PENSACOLA, FL 32502**Current Mailing Address:**PO BOX 1591
PENSACOLA, FL 32591 US**FEI Number: 80-0249546****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MELANCON, JENA C
914 N. BAYLEN ST.
PENSACOLA, FL 32501 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:** JENA CAROL MELANCON**02/02/2018**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name LOCKWOOD, RACHEL
Address PO BOX 1591
City-State-Zip: PENSACOLA FL 32591

Title SECRETARY
Name JONES, TARA
Address 375 N. NINTH AVE
City-State-Zip: PENSACOLA FL 32502

Title TREASURER
Name NICKELSEN, ERIC
Address 286 PLANTATION HILL RD
City-State-Zip: GULF BREEZE FL 32561

Title DIRECTOR
Name KICHLER, ADRIAN
Address 4870 MANOLETE
City-State-Zip: PENSACOLA FL 32504

Title CHAIR
Name JURKOWICH, KAREN
Address 2833 VENETIAN COURT
City-State-Zip: GULF BREEZE FL 32563

Title DIRECTOR
Name TIPPINS PARKER, JULIE
Address 4145 MONTALVO
City-State-Zip: PENSACOLA FL 32504

Title DIRECTOR
Name CARPENTER, RANDLE
Address 615 BAYSHORE DR #1205
City-State-Zip: PENSACOLA FL 32507

Title DIRECTOR
Name JONES, KASEY
Address 1000 COLLEGE BLVD.
City-State-Zip: PENSACOLA FL 32504

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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: JENA MELANCON**EXECUTIVE DIRECTOR****02/02/2018**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name WADE, LINDA
Address 14 N. PALAFOX ST.
City-State-Zip: PENSACOLA FL 32502

Title DIRECTOR
Name FERGUSON, REBECCA
Address 223 PALAFOX PLACE
ROOM 200
City-State-Zip: PENSACOLA FL 32502

Title DIRECTOR
Name FORD, ALLAN M. DR.
Address 223 PALAFOX PLACE
ROOM 200
City-State-Zip: PENSACOLA FL 32502

Title EXECUTIVE DIRECTOR
Name MELANCON, JENA CAROL
Address 223 PALAFOX PLACE
ROOM 200
City-State-Zip: PENSACOLA FL 32502

Title DIRECTOR
Name ADAMS, JOHN
Address 516 EVENTIDE DR.
City-State-Zip: GULF BREEZE FL 32561

Title DIRECTOR
Name POSEY, EDWARD B
Address 223 PALAFOX PLACE
ROOM 200
City-State-Zip: PENSACOLA FL 32502