## 2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000002071

Entity Name: GULF COAST JUNIOR GOLF TOUR, INC.

**Current Principal Place of Business:** 

1370 CREEKSIDE BLVD. NAPLES, FL 34108

**Current Mailing Address:** 

1370 CREEKSIDE BLVD. NAPLES, FL 34108 US

FEI Number: 65-0477835 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

BENSON, MICHAEL 1370 CREEKSIDE BLVD NAPLES, FL 34108 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: MICHAEL BENSON 01/26/2022

Electronic Signature of Registered Agent

Date

**FILED** Jan 26, 2022

**Secretary of State** 

8084829327CC

Officer/Director Detail:

Title **PRESIDENT** Title **SECRETARY** BENSON, MICHAEL FISHER, TERRI Name Name

1370 CREEKSIDE BLVD. 1370 CREEKSIDE BLVD. Address Address

City-State-Zip: NAPLES FL 34108 NAPLES FL 34108 City-State-Zip:

Title DIRECTOR Title VΡ Name TOBE, JOHN Name GREENBERG, PAUL

Address 1370 CREEKSIDE BLVD. Address 1370 CREEKSIDE BLVD. NAPLES FL 34108 City-State-Zip: NAPLES FL 34108 City-State-Zip:

Title DIRECTOR Title **TREASURER** 

Name BAIN. ANN NALLY, DENNIS Name

Address 1370 CREEKSIDE BLVD. 1370 CREEKSIDE BLVD. Address

City-State-Zip: NAPLES FL 34108 City-State-Zip: NAPLES FL 34108

Title DIRECTOR Title DIRECTOR

Name COHN, MORTON BENJAMIN, ANN Name

1370 CREEKSIDE BLVD. Address 1370 CREEKSIDE BLVD. Address

City-State-Zip: NAPLES FL 34108 City-State-Zip: NAPLES FL 34108

Continues on page 2

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.

01/26/2022 SIGNATURE: MICHAEL BENSON **PRESIDENT** 

Electronic Signature of Signing Officer/Director Detail

Date

## Officer/Director Detail Continued:

Title DIRECTOR Title DIRECTOR

Name GAYNOR, JOHN Name GINGRICH, NATHAN
Address 1370 CREEKSIDE BLVD. Address 1370 CREEKSIDE BLVD.

City-State-Zip: NAPLES FL 34108 City-State-Zip: NAPLES FL 34108

Title DIRECTOR Title DIRECTOR

Name MINYARD, ROBERT Name BAJAJ, SUDHIR

Address 1370 CREEKSIDE BLVD. Address 1370 CREEKSIDE BLVD.

City-State-Zip: NAPLES FL 34108 City-State-Zip: NAPLES FL 34108

Title DIRECTOR Title DIRECTOR

Name SCHMIEDING, DANIEL Name LEGUS, DAVID

Address 1370 CREEKSIDE BLVD. Address 1370 CREEKSIDE BLVD.

City-State-Zip: NAPLES FL 34108 City-State-Zip: NAPLES FL 34108