

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 711046

FILED
May 13, 2009
Secretary of State

Entity Name: GULFSTREAM GOODWILL INDUSTRIES, INC.

Current Principal Place of Business:

1715 TIFFANY DR E
WEST PALM BEACH, FL 334070224 US

New Principal Place of Business:

Current Mailing Address:

1715 TIFFANY DR E
WEST PALM BEACH, FL 334070224 US

New Mailing Address:

FEI Number: 59-1197040 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

TANCK, MARVIN A
1715 TIFFANY DR. E
WEST PALM BEACH, FL 334070224 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

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: TANCK, MARVIN A
Address: 1715 TIFFANY DR E
City-St-Zip: W PALM BCH, FL

Title: V () Delete
Name: COUNES, RHONDA
Address: 200 CROSSWINDS DRIVE, #A-2
City-St-Zip: WEST PALM BEACH, FL 33413

Title: V () Delete
Name: STEFF, SHERRY
Address: 15694 82ND LANE N
City-St-Zip: LOXAHATCHEE, FL 33470

Title: CD () Delete
Name: BANISTER, JOHN
Address: 12127 CAPTAINS LANDING
City-St-Zip: NORTH PALM BEACH, FL 33408

Title: TD () Delete
Name: UMBERGER, KARL
Address: 7402 MICHIGAN AVENUE
City-St-Zip: LAKE WORTH, FL 33467

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: TANCK, MARVIN A
Address: 1715 TIFFANY DR E
City-St-Zip: W PALM BCH, FL 33407

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: THOMAS D. MURPHY

CNTR

05/13/2009

Electronic Signature of Signing Officer or Director

Date