

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 714406

FILED
Feb 26, 2009
Secretary of State

Entity Name: GULF COAST MINERAL, FOSSIL AND GEM CLUB, INC.

Current Principal Place of Business:

P O BOX 1404
VENICE, FL 34284 US

New Principal Place of Business:

1021 GROUSE WAY
VENICE, FL 34284 US

Current Mailing Address:

P O BOX 1404
VENICE, FL 34284 US

New Mailing Address:

P O BOX 1404
VENICE, FL 34292 US

FEI Number: 59-1932019

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VEST, GERALDINE
1021 GROUSE WAY
VENICE, FL 34292 US

Name and Address of New Registered Agent:

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: BROWN, ALLEN
Address: 6637 TAEDA DR
City-St-Zip: SARASOTA, FL 34241

Title: S () Delete
Name: WALKER, BARBARA
Address: 1568 VER MEER DRIVE
City-St-Zip: NOKOMIS, FL 34275

Title: D () Delete
Name: MARBLE, RALPH
Address: 5240 DALLAS PALCE
City-St-Zip: SARASOTA, FL

Title: T () Delete
Name: GRANATA, THOMAS
Address: 744 CADIZ RD #9
City-St-Zip: VENICE, FL 34285

Title: VP () Delete
Name: JABLONSKI, URSULA
Address: 539 MISTY PINE DRIVE
City-St-Zip: VENICE, FL 34292

Title: D () Delete
Name: VEST, GERALDINE
Address: 1021 GROUSE WAY
City-St-Zip: VENICE, FL 34292

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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
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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 GRANATA

T

02/26/2009

Electronic Signature of Signing Officer or Director

Date