2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 728365

FILED Apr 03, 2009 Secretary of State

Entity Name: GULF HIGHLANDS CIVIC ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

7831 GULF HIGHLANDS DRIVE PORT RICHEY, FL 34668

Current Mailing Address: New Mailing Address:

7831 GULF HIGHLANDS DRIVE PORT RICHEY, FL 34668

FEI Number: 59-1830092 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

RIZZO, ELEANOR FRANCO, CANDACE 11539 MEREDITH LANE FRANCO CANDACE 7900 BELL DR

PORT RICHEY, FL 34668 US PORT RICHEY, FL 34668 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: CANDACE FRANCO 04/03/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP () Delete Title: VP (X) Change () Addition

 Name:
 VICICH, JERRY
 Name:
 TRIMMER, WAYNE

 Address:
 7107 ASH WOOD
 Address:
 7900 BELL DR.

 City-St-Zip:
 PORT RICHEY, FL 34668
 City-St-Zip:
 PORT RICHEY, FL 34668

Title: 2VP () Delete Title: () Change () Addition

 Name:
 DRURY, SKIP
 Name:

 Address:
 11733 NEWELL D
 Address:

 City-St-Zip:
 PORT RICHEY, FL 34668
 City-St-Zip:

Title: SD () Delete Title: () Change () Addition

Name:WILKINS, JUDITHName:Address:7207 ASHWOOD DRAddress:City-St-Zip:PORT RICHEY, FL 34668City-St-Zip:

 Name:
 MEAD, BARBARA
 Name:

 Address:
 7634 TOPAY LN
 Address:

 City-St-Zip:
 PORT RICHEY, FL 34668
 City-St-Zip:

 Name:
 STAN, DOROTHY
 Name:
 CONLEY, HARRY

 Address:
 7709 GATSON
 Address:
 7735 GASTON DR

 City-St-Zip:
 PORT RICHEY, FL 34668
 City-St-Zip:
 PORT RICHEY, FL 34668

Title: D () Delete Title: () Change () Addition

 Name:
 MABEE, DOROTHY
 Name:

 Address:
 11524 ZIMMERMAN RD
 Address:

 City-St-Zip:
 PORT RICHEY, FL 34668
 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: CANDACE FRANCO PRES 04/03/2009