2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 16, 2009
Secretary of State

DOCUMENT# 729111

Entity Name: GULF HARBORS CIVIC ASSOCIATION CHARITABLE FUND, INC.

Current Principal Place of Business:

4610 FLORAMAR TERRACE
NEW PORT RICHEY, FL 34652

New Principal Place of Business:

Current Mailing Address:

4610 FLORAMAR TERRACE
NEW PORT RICHEY, FL 34652

New Mailing Address:

FEI Number: 23-7366404 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HILGEN, ROSALIE K
5125 GLENN DR
NEW PORT RICHEY, FL 34652 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:	HONTZ, MARY LOU	
Address:	3861 TOPSAIL TRAIL	
City-St-Zip:	NEW PORT RICHEY, FL 34652	
Title:	VP	( ) Delete
Name:	RICHUTE, BOB	
Address:	3339 SEAWAY DR	
City-St-Zip:	NEW PORT RICHEY, FL 34652	
Title:	P	( ) Delete
Name:	BIFULCO, FRANK	
Address:	3347 SEAWAY DR	
City-St-Zip:	NEW PORT RICHEY, FL 34652	
Title:	S	( ) Delete
Name:	DELLA, SHARON	
Address:	4346 FLORAMAR TERRACE	
City-St-Zip:	NEW PORT RICHEY, FL 34652	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	C	(X) Change ( ) Addition
Name:	LEDOGAR, FREDERICK	
Address:	4857 SHELL STREAM BLVD.	
City-St-Zip:	NEW PORT RICHEY, FL 34652	
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: ROSALIE KAY HILGEN T 04/16/2009

Electronic Signature of Signing Officer or Director — Date