2008 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

May 22, 2008 8:00 am Secretary of State **DOCUMENT #738737** 05-22-2008 90018 041 ****61.25 GULF AREA GARDEN CLUB OF FORT WALTON BEACH, Mailing Address Principal Place of Business BROOKS-BEAL CENTER MAZIE L GLOVER 318 BROOKS ST SE 100 NW BEAL PKWY FORT WALTON BEACH, FL 32548-7233 US FORT WALTON BEACH, FL 32548 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 03102008 Chg-NP CR2E037 (12/06) 4. FEI Number 59-6570430 Applied For City & State City & State Not Applicable \$8.75 Additional Zip Country Zip Country 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name GLOVER, MAZIE L Street Address (P.O. Box Number is Not Acceptable) 318 BROOKS ST SE FORT WALTON BEACH, FL 32548-72383 Zip Code City FL 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE DATE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable Make check payable to 9. Election Campaign Financing \$5.00 May Be Filing Fee is \$61.25 Florida Department of State Trust Fund Contribution. Due by May 1, 2008 Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. ☐ Addition Delete TTD TITLE ☐ Change TITLE BUSH BETTY J NAME NAME STREET ADDRESS 205 NE HUGHES ST. STREET ADDRESS CITY-ST-ZIP FORT WALTON BEACH, FL 32548 CITY-ST-7IP P_ NAMEY KENASTON 24 NEPTUNE DRIVE Change ☐ Addition Delete TINE TITLE SHERINGO, ANNETTE NAME NAME STREET ADDRESS 52 BAYOU DR STREET ADDRESS MARY ESTHER, FL 32569 CITY-ST-ZIP FORT WALTON BEACH, FL 32547 CITY-ST-7IP IVP- ElsiE KElly Delete TITLE JENNINGS, HONEY NAME NAME P.O. BOX 188 STREET ADDRESS 39 LAKEVIEW DR. STREET ADDRESS MARY ESTHER, FL 32569 CITY-ST-ZIP MARY ESTHER, FL 32569 CITY-ST-ZIP 2NP- BETTY HARRISON TELLE Delete TITLE PHILLIPS, THELMA NAME NAME 4 PEMBROKE PIACE STREET ADDRESS 9 BAYVIEW DR. STREET ADDRESS FT. WAItON BCH.FL 32547 SHALIMAR, FL 32579 CETY-ST-ZIP CITY-ST-71P Addition Detete MILE KEMP, MARGARET R NAME 204 FOREST DR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP FT. WALTON BEACH, FL 32547 CITY-ST-ZIP ☐ Delete TITLE REGISTEREDAGENT ☐ Change Addition TILLE NAME MAZIE L. GLOVER STREET ADDRESS STREET ADDRESS 318 BROOKS STSE FW GITON BEACH, FL 32548

FILED

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if charged, or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP

CITY-ST-7IP

MAZIE L. GlOVER, R.A., 5-15-08, (850) 244-5497