2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 757719

FILED Apr 30, 2009 Secretary of State

Entity Name: GULF BREEZE QUARTERBACK CLUB, INC. **Current Principal Place of Business: New Principal Place of Business:** P.O. BOX 564 6079 BLAIR CIRCLE GULF BREEZE, FL 32562 GULF BREEZE, FL 32563 **Current Mailing Address: New Mailing Address:** P.O. BOX 564 6079 BLAIR CIRCLE GULF BREEZE, FL 32562 GULF BREEZE, FL 32563 FEI Number: 16-1696155 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: GROSS, TERRENCE A 917 N PALAFOX ST PENSACOLA, FL 32501 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete WHITE, RUSSELL Name: Name: 412 SURREY DR Address: Address: City-St-Zip: GULF BREEZE, FL 32561 City-St-Zip: Title: VD () Delete Title: VD (X) Change () Addition WANFORD, GARY Name: RODEWALD, JEFF Name: Address: 375 JAMES RIVER RD Address: 2407 PLESANT POINT CIRCL City-St-Zip: GULF BREEZE, FL 32561 City-St-Zip: NAVARRE, FL 32566 Title: () Delete Title: TD (X) Change () Addition SHAY, LINDA ROBERT, KAREN Name: Name: 6079 BLAIR CIRCLE Address: 1585 WOODLAWN WAY Address: City-St-Zip: GULF BREEZE, FL 32563 City-St-Zip: GULF BREEZE, FL 32563 Title: SD () Delete Title: SD (X) Change () Addition MANN, MICHELLE Name: Name: URQUHART, BILLIE Address: 1339 TOUR DR Address: 1536 KITTYHAWK DRIVE City-St-Zip: GULF BREEZE, FL 32563 City-St-Zip: GULF BREEZE, FL 32563

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: KAREN ROBERT TD 04/30/2009