

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 764360

FILED
Apr 30, 2009
Secretary of State

Entity Name: GREATER PENSACOLA SEMINOLE CLUB, INC.

Current Principal Place of Business:

130 E. GOVERNMENT ST.
ATTENTION BRETT BERG GPSC
PENSACOLA, FL 32502

New Principal Place of Business:

50 HIGHPOINT DR.
ATTENTION BRETT BERG GPSC
GULF BREEZE, FL 32561

Current Mailing Address:

% BRETT BERG
P.O. BOX 12581
PENSACOLA, FL 32591

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STANOVICH, MARTY
2020 BAYOU GRANDE BLVD
PENSACOLA, FL 32507 US

Name and Address of New Registered Agent:

YOUD, JOSEPH R
50 HIGHPOINT DR.
GULF BREEZE, FL 32561 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: JOSEPH R. YOUD, JR.

04/30/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: PRATOFIORITO, PAUL
Address: 4025 MONTALVO DR.
City-St-Zip: PENSACOLA, FL 32504

Title: D () Delete
Name: DAVIS, GREGORY
Address: 8900SCENIC HILLS DR.
City-St-Zip: PENSACOLA, FL 32514

Title: DP () Delete
Name: BERG, BRETT
Address: 1629 COLLEGE PKWY.
City-St-Zip: GULF BREEZE, FL 32563

Title: DT () Delete
Name: YOUD, JOSEPH R JR.
Address: 50 HIGHPOINT DR.
City-St-Zip: GULF BREEZE, FL 32561

Title: DS () Delete
Name: BELLAN, ROBIN
Address: 1220 NORTHBROOK DR.
City-St-Zip: PENSACOLA, FL 32504

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
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: JOSEPH R. YOUD, JR.

DT

04/30/2009

Electronic Signature of Signing Officer or Director

Date