

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# C10426

FILED
Jan 05, 2007
Secretary of State

Entity Name: GULF COUNCIL NO. 29, ROYAL AND SELECT MASTERS

Current Principal Place of Business:

133 BROOKS STREET
FORT WALTON BEACH, FL 32548

New Principal Place of Business:

Current Mailing Address:

195 DELUDA ROAD SW
FT. WALTON BEACH, FL 32548 US

New Mailing Address:

FEI Number: 59-1889202

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOWARD, WILLIAM A ECORDER
195 DELUNA ROAD
FT WALTON BEACH, FL 32548 US

Name and Address of New Registered Agent:

HOWARD, WILLIAM A S
195 DELUNA ROAD
FT WALTON BEACH, FL 32548 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: WILLIAM A HOWARD

01/05/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: WATERS, CARL E IM
Address: 1033 BLVD PARISIENCE
City-St-Zip: MARY ESTHER, FL 32569

Title: D () Delete
Name: LEWIS, JOHN M
Address: 511 WEXFORD DRIVE
City-St-Zip: NICEVILLE, FL 32579

Title: S () Delete
Name: LILLIE, CHARLES R
Address: 212 HOLMES BLVD
City-St-Zip: FT WALTON BEACH, FL 32548

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: WATERS, CARL E P
Address: 1033 BLVD PARISIENCE
City-St-Zip: MARY ESTHER, FL 32569

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: LILLIE, CHARLES R
Address: 212 HOLMES BLVD
City-St-Zip: FT WALTON BEACH, FL 32548

I hereby certify that the information supplied with this filing does not qualify for the 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: WILLIAM A HOWARD

S

01/05/2007

Electronic Signature of Signing Officer or Director

Date