

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000001803

FILED
Mar 12, 2009
Secretary of State

Entity Name: THE GULF COAST ZOOLOGICAL SOCIETY, INC.

Current Principal Place of Business:

5703 GULF BREEZE PARKWAY
GULF BREEZE, FL 32563 US

New Principal Place of Business:

Current Mailing Address:

5703 GULF BREEZE PARKWAY
GULF BREEZE, FL 32563 US

New Mailing Address:

FEI Number: 59-3653239

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LANTZ, DANYELLE L
5703 GULF BREEZE PARKWAY
GULF BREEZE, FL 32561 US

Name and Address of New Registered Agent:

LANTZ, DANYELLE L
5703 GULF BREEZE PARKWAY
GULF BREEZE, FL 32563 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:

03/12/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: GOULD, JAY
Address: 11000 UNIVERSITY PARKWAY 42
City-St-Zip: PENSACOLA, FL 32514

Title: PD () Delete
Name: EMLING, CHUCK
Address: 605 CHESAPEAKE DRIVE
City-St-Zip: GULF BREEZE, FL 32561

Title: VD () Delete
Name: BARRON, JERRY
Address: 7425 SAN RAMON DRIVE
City-St-Zip: MILTON, FL 32583

Title: D () Delete
Name: STEWART, GEORGE L
Address: 11000 UNIVERSITY PARKWAY
City-St-Zip: PENSACOLA, FL 32562

Title: TD () Delete
Name: LYNCHARD, DARYL D
Address: P.O. BOX 5248
City-St-Zip: NAVARRE, FL 32566

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: D (X) Change () Addition
Name: CURTIN, JOANNE
Address: 11000 UNIVERSITY PARKWAY
City-St-Zip: PENSACOLA, FL 32514

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: CHUCK EMLING

MR.

03/12/2009

Electronic Signature of Signing Officer or Director

Date