

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000000094

FILED  
Apr 24, 2009  
Secretary of State

**Entity Name:** GUARDIANSHIP PROGRAM OF PASCO COUNTY, INC.

**Current Principal Place of Business:**

5318 BALSAM ST  
NEW PORT RICHEY, FL 34652

**New Principal Place of Business:**

**Current Mailing Address:**

5318 BALSAM ST  
NEW PORT RICHEY, FL 34652

**New Mailing Address:**

**FEI Number:** 59-3691978

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

GAY, GREGORY G  
5318 BALSAM ST  
NEW PORT RICHEY, FL 34652 US

**Name and Address of New Registered Agent:**

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:**

Title: D (X) Delete  
Name: AYCRIGG, WILLIAM  
Address: 23902 FOREST PL  
City-St-Zip: LAND O' LAKES, FL 34639

Title: D ( ) Delete  
Name: COOK, TRISH  
Address: 12417 RIDGEDALE DRIVE  
City-St-Zip: HUDSON, FL 34669

Title: DVP (X) Delete  
Name: HOOK, JOAN NELSON  
Address: 4819 FLORAMAR TERRACE  
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: DT ( ) Delete  
Name: DURSTEIN, RICHARD  
Address: 1191 MINEOLA CT  
City-St-Zip: PALM HARBOR, FL 34683

Title: DS ( ) Delete  
Name: DEPETRILLO, DOMINICK  
Address: 5016 ANCHOR WAY  
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: DP ( ) Delete  
Name: GAY, GREGORY G  
Address: 7831 CALLAN CT  
City-St-Zip: NEW PORT RICHEY, FL 34654

**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:

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: GREGORY G. GAY

PRES

04/24/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date