2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000007843

FILED Feb 01, 2006 Secretary of State

Entity Name: GULF COAST FLORIDA CHAPTER ASHL INC

Littly Na	ille. Golf CC	DAST FLORIDA CHAFTER AC	orn, inc.		
Current Principal Place of Business:			New Principal Place of Business:		
5100 S. CLEVELAND AVENUE STE 318 PMB # 102 FT. MYERS, FL 33907			1270 PLUMOSA DRIVE FT. MYERS, FL 33901		
Current Mailing Address:			New Mailing Address:		
5100 S. CLEVELAND AVENUE STE 318 PMB # 102 FT. MYERS, FL 33907			1270 PLUMOSA DRIVE FT. MYERS, FL 33901		
FEI Number	: 59-3687004	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of New Registered Agent:		
The above	MOSA DR. S, FL 33901	US submits this statement for the լ	purpose of changing its registered	l office or registered agent, or both,	
SIGNATU					
0.014/ (10.		nic Signature of Registered Ag	ent	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	PD () WARREN, DAN 3714 LIBERTY FT. MYERS, FL	SQUARE	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	VD () GLUCKSTAL, L 16855 FOX DE FORT MYERS,	N	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	SD () BROWN, GLEN 1270 PLUMOS FT. MYERS, FL	A DR.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	TD () CIRABISI, GEO 1278 VENETIAI NAPLES, FL 3	N WAY	Title: Name: Address: City-St-Zip:	()Change ()Addition	

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: GLEN BROWN SECR 02/01/2006