2006 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT (AR)**

Apr 17, 2006 8:00 am Secretary of State DOCUMENT # No 1362 04-17-2006 90342 036 ****61.25 1. Entity Name GULFCOAST GEM & MINERAL SOCIETY, INC. Principal Place of Business Mailing Address 408 ROWE DRIVE PANAMA CITY FL 32401 US 710 IOWA AV LYNN HAVEN FL 32444 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/05) City & State 4. FEI Number Applied For City & State 58-1272609 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent NEAL B/BIANA HALL, GEORGE Street Address (P.O. Box Number is Not Acceptable) 607 INDIANA AVE., 408 ROWE DRIVE LYNN HAVEN FL 32444 Zip Code 31.40/ LUAKA CITY 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE DATE FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to **\$5.00** May Be Due By May 1, 2006 Trust Fund Contribution. Added to Fees Florida Department of State. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. ☐ Delete TITLE Change Addition NEAL, BIBIANA NAME NAME 408 ROWE DR STREET ADDRESS STREET ADDRESS PANAMA CITY FL 32401 CtTY-ST-ZIP CITY-ST-7/P PRESIDENT Delete TITLE TITLE Change ☐ Addition VIVIAN GUTTING HALL, GEORGE NAME NAME 607 INDIANA AVE 3133 W. 215T CT. STREET ADDRESS STREET ADDRESS BANAML EITY, LYNN HAVEN FL 32444 CITY-ST-ZIP FL 32405 CITY-ST-ZIP Addition VP/D ☐ Delete ☐ Change NAME PETERSON, CONNIE NAME PO BOX 16416 STREET ADDRESS STREET ADDRESS CITY - ST - 719 PANAMA CITY FL 32406 CITY - ST - 7IP ☐ Delete Change TITLE TITLE ☐ Addition **GUTTING, BOB** NAME NAME STREET ADDRESS 3133 W 21 CT STREET ADDRESS CITY-ST-ZIP PANAMA CITY FL 32405 CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NEAL, BIBIANA NAME NAME **408 ROWE DRIVE** STREET ADDRESS STREET ADDRESS PANAMA CITY FL 32401 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition TITLE TITLE MCCOY, SARA NAME NAME 453 SUDDUTH AVE STREET ADDRESS STREET ADDRESS

I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119. Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP

SIGNATURE:

PANAMA CITY FL 32401

RIBIANA NEAC

4-10-06

FILED

850-763-00L4