2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 13, 2012
Secretary of State

DOCUMENT# N02000007242

Entity Name: GULFCOAST RETIRED FIREFIGHTERS ASSOCIATION, INC.

Current Principal Place of Business:

2760 GOLDEN GATE BLVD.WEST
NAPLES, FL 34120

New Principal Place of Business:

4655 PINE RIDGE ROAD EXT.
NAPLES, FL 34119

Current Mailing Address:

2760 GOLDEN GATE BLVD.WEST
NAPLES, FL 34120

New Mailing Address:

4655 PINE RIDGE ROAD EXT.
NAPLES, FL 34119

FEI Number: 59-3758869 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MURPHY, FRANK P
6210 TAMIAMI TRAIL NO
NAPLES, FL 34108 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: PRES
Name: WHELAN, WILLIAM W
Address: 4332 REDONDA LANE
City-St-Zip: NAPLES, FL 34109

Title: VP
Name: UZZI, MICHAEL J
Address: 1211 EGRETS LANDING #202
City-St-Zip: NAPLES, FL 34108

Title: RS
Name: FARRELL, MARK
Address: 117 GRANVILLE COURT
City-St-Zip: NAPLES, FL 34104

Title: TREA
Name: CADREAU, SAMUEL A
Address: 4655 PINE RIDGE ROAD EXT.
City-St-Zip: NAPLES, FL 34119

Title: SOA
Name: MCGOWAN, JOHN
Address: 11111 PALMETTO RIDGE DR
City-St-Zip: NAPLES, FL 34109

I hereby 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 all other like empowered.

SIGNATURE: SAMUEL A. CADREAU TREA 02/13/2012
Electronic Signature of Signing Officer or Director Date