

2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # N02000009795

1. Entity Name
GULF COAST ACADEMY OF SCIENCE AND
TECHNOLOGY, INC.



Principal Place of Business
10444 TILLERY ROAD
SPRING HILL, FL 34608

Mailing Address
10444 TILLERY ROAD
SPRING HILL, FL 34608

FILED
07 APR -9 PM 3:14
CLERK OF STATE
TALLAHASSEE, FLORIDA



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

04042007 Chg-NP CR2E037 (12/06)

City & State

City & State

4. FEI Number
04-3732649

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☒ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SIEFERT, NEVIN R II
10444 TILLERY ROAD
SPRING HILL, FL 34608

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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 Nevin Ray Siefert II

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

04/04/2007

DATE

Amended AR is \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make check payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE D ☐ Delete
NAME GATTI, JOSEPH A
STREET ADDRESS P O BX 1106
CITY-ST-ZIP BROOKSVILLE, FL 34605

TITLE SD ☐ Delete
NAME SIEFERT, NEVIN R II
STREET ADDRESS 14131 PIER STREET
CITY-ST-ZIP SPRING HILL, FL 34609

TITLE PD ☐ Delete
NAME O'CONNOR, KEVIN W
STREET ADDRESS 19375 INGRAM STREET
CITY-ST-ZIP BROOKSVILLE, FL 34601

TITLE VD ☐ Delete
NAME FLOYD, JACKYE
STREET ADDRESS 13447 LAWRENCE ST
CITY-ST-ZIP SPRING HILL, FL 34609

TITLE TD ☐ Delete
NAME BRAULT, BOBBY
STREET ADDRESS 3375 BLUEFISH DR
CITY-ST-ZIP SPRING HILL, FL 34607

TITLE D ☐ Delete
NAME EVANS, LORI
STREET ADDRESS 9759 HORIZON DRIVE
CITY-ST-ZIP SPRING HILL, FL 34608

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D ☐ Change ☒ Addition
NAME NEMETZ, MICHAEL
STREET ADDRESS 5206 DEERFIELD AVENUE
CITY-ST-ZIP SPRING HILL, FL 34608

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME 70009723837
STREET ADDRESS 04/17/07--01040--020 ***70.00
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.

SIGNATURE: Nevin Ray Siefert II

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/04/2007

Date

352-688-5092

Daytime Phone #