2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 19, 2009
Secretary of State

DOCUMENT# N03000004347

Entity Name: GULF COAST HIGH SCHOOL BAND AID CLUB, INC.

Current Principal Place of Business:

7878 SHARK WAY
NAPLES, FL 34119

New Principal Place of Business:

Current Mailing Address:

7878 SHARK WAY
NAPLES, FL 34119

New Mailing Address:

FEI Number: 27-0047915 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

HAMBERG, ROBERT
3544 EL VERDADO
NAPLES, FL 34109 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: PD ( ) Delete
Name: WISEMAN, SHERI
Address: 7878 SHARK WAY
City-St-Zip: NAPLES, FL 34119

Title: VD ( ) Delete
Name: RISHER, ERIN
Address: 7875 SHARK WAY
City-St-Zip: NAPLES, FL 34110

Title: SD ( ) Delete
Name: LOYD, JAMIE
Address: 7878 SHARK WAY
City-St-Zip: NAPLES, FL 34119

Title: TD ( ) Delete
Name: CARNEY, JEFF
Address: 7878 SHARK WAY
City-St-Zip: NAPLES, FL 34119

Title: BD ( ) Delete
Name: HAMBERG, ROBERT
Address: 3544 EL VERDADO
City-St-Zip: NAPLES, FL 34109

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:

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: ROBERT AUSTIN HAMBERG MR. 01/19/2009

Electronic Signature of Signing Officer or Director — Date