2008 NOT-FOR-PROFIT CORPORATION

Feb 29, 2008 8:00 am Secretary of State ANNUAL REPORT DOCUMENT # N04000009213 02-29-2008 90026 029 ****61.25 CENTRAL GULF COAST CHAPTER OF NIGP, INC. Principal Place of Business Mailing Address %RICHARD BRANNON % RICHARD BRANNON 602-C NORTH PEARL ST 602-C NORTH PEARL ST CRESTVIEW, FL 32536 CRESTVIEW, FL 32536 01092008 No Chg-NP CR2E037 (4/06) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number **NOT APPLICABLE** Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent BRANNON, RICHARD L DO NOT WRITE OKALOOSA CO BOARD OF COUNTY COMMISSIONERS 602-C NORTH PEARL ST IN THIS SPACE CRESTVIEW, FL 32536 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 ager 0/- 09- 08 MICHARD L. BRANNIN CHAPTER PRESIDENT SIGNATURE Signature, typed or printed name of registered agent and title if applicable Filing Fee is \$61.25 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees Due by May 1, 2008 10. OFFICERS AND DIRECTORS NAME BRANNON, RICHARD L STREET ADDRESS 602-C NORTH PEARL ST CITY-ST-ZIP CRESTVIEW, FL 32536 TITLE VP NAME SEWELL, JON STREET ADDRESS 3529 E 3RO STREET CITY-ST-7IP SPRINGFIELD, FL 32401 TITLE JONES, ANGIE C STREET ADDRESS PENSACOLA JR. COLLEGE, 1000 COLLEGE BLVD. DO NOT WRITE CITY-ST-ZIP PENSACOLA, FL 32504 IN THIS SPACE TITLE NAME BRADSHAW, BART STREET ADDRESS 509 PLANTATION DR. CITY-ST-ZIP PANAMA CITY, FL 324048624

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:

TITLE NAME STREET ADDRESS CITY-ST-ZIP ImF NAME STREET ADDRESS CITY-ST-7IP

FILED