## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N05000002895

FILED Apr 22, 2009 Secretary of State

Entity Name: GULF COUNTY COMMUNITY DEVELOPMENT CORPORATION

Current Principal Place of Business: New Principal Place of Business:

106 TRADE CIRCLE WEST401 PETERS STREETPORT ST. JOE., FL 32457PORT ST. JOE., FL 32456

Current Mailing Address: New Mailing Address:

P.O. BOX 837 401 PETERS STREET PORT ST. JOE., FL 32457 PORT ST. JOE., FL 32456

FEI Number: 84-1674649 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BOLDEN, DANNIE E. LAMB, QUEN 110 BRENDA DRIVE 1304 PALM BLVD.

PORT ST. JOE., FL 32456 US PORT ST. JOE., FL 32456 US

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: QUEN W. LAMB 04/22/2009

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D ( ) Delete Title: D (X) Change ( ) Addition Name: BOLDEN, DANNIE Name: LAMB, QUEN

 Address:
 110 BRENDA DRIVE
 Address:
 1304 PALM BLVD

 City-St-Zip:
 PORT ST. JOE., FL 32456
 City-St-Zip:
 PORT ST. JOE., FL 32456

Title: D ( ) Delete Title: P (X) Change ( ) Addition Name: HUFT, JERRY Name: VAN TRESE, DAN

Address: 235 CHIPOLA AVE Address: 1311 MCCLELLAND AVE
City-St-Zip: WEWAHITCHKA, FL 32465 City-St-Zip: PORT ST. JOE, FL 32456

Title: D ( ) Delete Title: V (X) Change ( ) Addition Name: MAGIDSON, MEL JR. Name: WHITE, TROY

Address: 528 6TH ST. Address: 303 MLK, BLVD

City-St-Zip: PORT ST. JOE., FL 32456 City-St-Zip: PORT ST. JOE., FL 32456

 $\label{eq:title:D} {\sf Title:} \qquad {\sf D} \qquad (\ ) \, {\sf Delete} \qquad \qquad {\sf Title:} \qquad {\sf S} \qquad ({\sf X}) \, {\sf Change} \, (\ ) \, {\sf Addition}$ 

 Name:
 WARRINER, DAVID
 Name:
 CROFT, TIM

 Address:
 P.O. BOX 280
 Address:
 135 W U.S. HIGHWAY 98

City-St-Zip: PORT ST. JOE., FL 32457 City-St-Zip: PORT ST. JOE., FL 32456

Title: D () Delete Title: D (X) Change () Addition

 Name:
 MCNAIR, ALAN
 Name:
 RAMSEY, WILLIE

 Address:
 559 S. HWY 71
 Address:
 1004 MARVIN AVE

 City-St-Zip:
 WEWAHITCHKA, FL 32465
 City-St-Zip:
 PORT ST. JOE, FL 32456

Title: D ( ) Delete Title: D (X) Change ( ) Addition

 Name:
 GASKIN, JERRY
 Name:
 GIVENS, CHARLES

 Address:
 236 OLD PANAMA HWY
 Address:
 303 MLK, BLVD

 City-St-Zip:
 WEWAHITCHKA, FL 32465
 City-St-Zip:
 PORT ST. JOE, FL 32456

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: QUEN W. LAMB D 04/22/2009