

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000004061

FILED
Jul 28, 2009
Secretary of State

Entity Name: THE GIFFORD FRONT PORCH REVITALIZATION COUNCIL INCORPORATED

Current Principal Place of Business:

4875 43RD AVE.
VERO BEACH, FL 32967

New Principal Place of Business:

Current Mailing Address:

4875 43RD AVE.
VERO BEACH, FL 32967

New Mailing Address:

FEI Number: 20-3002547 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

HUNTER, SAMUEL
4206 41ST STREET
VERO BEACH, FL 32967 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: CD () Delete
Name: WOOLFORK, FREDDIE
Address: 4590 57TH AVENUE
City-St-Zip: VERO BEACH, FL 32967

Title: TD () Delete
Name: IDLETTE, JOE N III
Address: 4570 57TH AVE.
City-St-Zip: VERO BEACH, FL 32967

Title: CD () Delete
Name: MCKINNEY, MARY B
Address: 5616 41ST STREET
City-St-Zip: VERO BEACH, FL 32967

Title: SD () Delete
Name: RIGBY, ARDRA
Address: 8465 59TH AVE.
City-St-Zip: WABASSO, FL 32970

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:

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: FREDDIE WOOLFORK

CD

07/28/2009

Electronic Signature of Signing Officer or Director

_____ Date