

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000008013

FILED
Apr 25, 2009
Secretary of State

Entity Name: GULF COAST CHAPTER AMERICAN PAYROLL ASSOCIATION, INC.

Current Principal Place of Business:

101 ARTHUR ANDERSEN PKWY
DOLPHIN ROOM
SARASOTA, FL 34232

New Principal Place of Business:

5317 FRUITVILLE RD
#216
SARASOTA, FL 34232

Current Mailing Address:

5317 FRUITVILLE RD
#216
SARASOTA, FL 34232

New Mailing Address:

FEI Number: 65-1030492 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

MCKEEN, MARCIA CPP
7023 49TH PLACE E.
PALMETTO, FL 34221 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: TREA () Delete
Name: MARCIA, MCKEEN CPP
Address: 7023 49TH PLACE E
City-St-Zip: PALMETTO, FL 34221

Title: SEC () Delete
Name: MARTHA, FRANK CPP
Address: 101 ARTHUR ANDERSEN PKWY, #100
City-St-Zip: SARASOTA, FL 34232

Title: VP () Delete
Name: WOODAREK, PAUL
Address: 300 SARASOTA CENTER BLVD
City-St-Zip: SARAOSTA, FL 34240

Title: PRES () Delete
Name: REINHARDT, JULIE CPP
Address: 7023 48TH AVE E
City-St-Zip: PALMETTO, FL 34221

Title: MEMB () Delete
Name: MCKEEN, MARCIA CPP
Address: 7023 49TH PLACE E
City-St-Zip: PALMETTO, FL 34221

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: SEC (X) Change () Addition
Name: JOY, ONEY FPC
Address: 2601 CATTLEMEN RD
City-St-Zip: SARASOTA, FL 34232

Title: VP (X) Change () Addition
Name: KAREN, REYNOLDS FPC
Address: 2601 CATTLEMEN RD
City-St-Zip: SARAOSTA, FL 34232

Title: PRES (X) Change () Addition
Name: DEBRA, BRANCH CPP
Address: 14400 COVENANT WAY
City-St-Zip: BRADENTON, FL 34202

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: MARCIA MCKEEN

TREA

04/25/2009

Electronic Signature of Signing Officer or Director

Date