


# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 01, 2008 8:00 am**  
**Secretary of State**

05-01-2008 90188 006 \*\*\*\*61.25

DOCUMENT # N05000009882					
<b>1. Entity Name</b> FLORIDA PLANNING AND ZONING ASSOCIATION, GULF COAST CHAPTER, INC.					
<b>Principal Place of Business</b> 1205 MANATEE AVE WEST BRADENTON, FL 34205			<b>Mailing Address</b> 1205 MANATEE AVE WEST BRADENTON, FL 34205		
<b>2. Principal Place of Business - No P.O. Box #</b>		<b>3. Mailing Address</b>			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	<b>4. FEI Number</b> 20-3559894	
<b>5. Certificate of Status Desired</b> <input type="checkbox"/>				<b>\$8.75 Additional Fee Required</b>	
<b>6. Name and Address of Current Registered Agent</b>			<b>7. Name and Address of New Registered Agent</b>		
THOMPSON, STEPHEN W ESQ 1205 MANATEE AVE WEST BRADENTON, FL 34205			Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
<b>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 agent.</b>					
SIGNATURE _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
<b>Filing Fee is \$61.25 Due by May 1, 2008</b>		<b>9. Election Campaign Financing</b> Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
<b>10. OFFICERS AND DIRECTORS</b>		<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>			
<b>TITLE</b> PD <b>NAME</b> LAYTON, RACHEL <b>STREET ADDRESS</b> 1201 9TH AVE WEST <b>CITY-ST-ZIP</b> BRADENTON, FL 34205	<input checked="" type="checkbox"/> Delete				
<b>TITLE</b> 1VPD <b>NAME</b> STOKES, KEN <b>STREET ADDRESS</b> 551 N CATTLEMEN RD STE.202 <b>CITY-ST-ZIP</b> SARASOTA, FL 34232	<input checked="" type="checkbox"/> Delete				
<b>TITLE</b> 2VPD <b>NAME</b> POKRYWA, TODD <b>STREET ADDRESS</b> 6215 LORRAINE RD <b>CITY-ST-ZIP</b> BRADENTON, FL 34202	<input checked="" type="checkbox"/> Delete				
<b>TITLE</b> 3VPD <b>NAME</b> SHINAS, ARISTOTLE <b>STREET ADDRESS</b> P.O. BOX 1000 <b>CITY-ST-ZIP</b> BRADENTON, FL 34206	<input checked="" type="checkbox"/> Delete				
<b>TITLE</b> SD <b>NAME</b> WILE, ELLEN <b>STREET ADDRESS</b> 1205 MANATEE AVE WEST <b>CITY-ST-ZIP</b> BRADENTON, FL 34205	<input type="checkbox"/> Delete				
<b>TITLE</b> TD <b>NAME</b> THOMPSON, KATHLEEN <b>STREET ADDRESS</b> P.O. BOX 1000 <b>CITY-ST-ZIP</b> BRADENTON, FL 34206	<input type="checkbox"/> Delete				
<b>TITLE</b> PD <b>NAME</b> Ken Stokes <b>STREET ADDRESS</b> HNTB Corporation <b>CITY-ST-ZIP</b> 6371 Business Blvd., Ste.108, Sarasota, FL 34240	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition				
<b>TITLE</b> 1VPD <b>NAME</b> Stephen W. Thompson <b>STREET ADDRESS</b> Porges, Hamlin, et al. <b>CITY-ST-ZIP</b> 1205 Manatee Ave. W., Bradenton, FL 34205	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition				
<b>TITLE</b> 2VPD <b>NAME</b> Aristotle Shinas <b>STREET ADDRESS</b> Manatee County Public Works, 1022 26th Ave. E. <b>CITY-ST-ZIP</b> Bradenton, FL 34208	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition				
<b>TITLE</b> 3VP <b>NAME</b> Courtney Craker, Wilson Miller Inc. <b>STREET ADDRESS</b> 6900 Professional Pkwy E., Ste. 100, Sarasota, FL	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
<b>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.</b>					
<b>SIGNATURE:</b> <u>Ellen Wile</u> <u>Ellen Wile</u> <u>4/16/08</u> <u>941-748-3770</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					