

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000001896

FILED
Jul 10, 2008
Secretary of State

Entity Name: GULF COUNTY COMMUNITY LAND TRUST, INC.

Current Principal Place of Business:

301 E. 1ST STREET
PORT ST. JOE, FL 32456

New Principal Place of Business:

401 PETERS STREET
PORT ST. JOE, FL 32456

Current Mailing Address:

301 E. 1ST STREET
PORT ST. JOE, FL 32456

New Mailing Address:

401 PETERS STREET
PORT ST. JOE, FL 32456

FEI Number: 43-2105694 **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:

COSTIN, CHARLES A
413 WILLIAMS AVENUE
PORT ST. JOE, FL 32456 US

Name and Address of New Registered Agent:

MAGIDSON, MEL C JR.
528 6TH STREET
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: MEL C. MAGIDSON JR.

07/10/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: CROFT, TIM
Address: 3285 GARRISON AVENUE
City-St-Zip: PORT ST. JOE, FL 32456

Title: VD () Delete
Name: COSTIN, LORETTA
Address: 167 CESSNA DRIVE
City-St-Zip: PORT ST. JOE, FL 32456

Title: SD () Delete
Name: HENDRY, JOHN
Address: 1511 MONUMENT AVENUE
City-St-Zip: PORT ST. JOE, FL 32456

Title: TD () Delete
Name: JOHNSON, GREG
Address: 202 MARINE DRIVE
City-St-Zip: PORT ST. JOE, FL 32456

Title: D () Delete
Name: WARRINER, DAVID
Address: POST OFFICE BOX 280
City-St-Zip: PORT ST. JOE, FL 32457

Title: D () Delete
Name: PIERCE, CHARLOTTE
Address: POST OFFICE BOX 462
City-St-Zip: PORT ST. JOE, FL 32457

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D (X) Change () Addition
Name: MAGIDSON, MEL C JR
Address: 1511 MONUMENT AVENUE
City-St-Zip: PORT ST. JOE, FL 32456

Title: TD (X) Change () Addition
Name: JOHNSON, GREG
Address: 212 GAUTIER
City-St-Zip: PORT ST. JOE, FL 32456

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: MEL C. MAGIDSON JR.

D

07/10/2008

Electronic Signature of Signing Officer or Director

Date