2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 28, 2008
Secretary of State

DOCUMENT# N06000008028

Entity Name: GULF COAST YOUTH BASKETBALL, INC.

Current Principal Place of Business:

26165 LAHORE LANE
PUNTA GORDA, FL 33983

New Principal Place of Business:

Current Mailing Address:

P O BOX 511283
PUNTA GORDA, FL 33951

New Mailing Address:

FEI Number: 06-1785914 **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:

COLLINS, LISA
25165 LAHORE LANE
PUNTA GORDA, FL 33983 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: V ( ) Delete
Name: COLLINS, LISA
Address: 25165 LAHORE LN.
City-St-Zip: PUNTA GORDA, FL 33983

Title: V ( ) Delete
Name: IVANKOVIC, DAVE
Address: 18247 HOTTELET CR
City-St-Zip: PORT CHARLOTTE, FL 33948

Title: D (X) Delete
Name: REICHEWBACH, BRUCE
Address: 2327 PONGOLA
City-St-Zip: NORTH PORT, FL 34286

Title: D (X) Delete
Name: VERNON, JAMES
Address: 1189 OXSULIDA ST
City-St-Zip: PORT CHARLOTTE, FL 33952

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: LISA C ROSE- COLLINS V 05/28/2008
Electronic Signature of Signing Officer or Director — Date