

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000001344

FILED
Apr 30, 2009
Secretary of State

Entity Name: GULF COAST TIMEKEEPERS, INCORPORATED

Current Principal Place of Business:

3215 SAN MATEO STREET
CLEARWATER, FL 33759

New Principal Place of Business:

Current Mailing Address:

3215 SAN MATEO STREET
CLEARWATER, FL 33759

New Mailing Address:

FEI Number: 26-0264065

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BRADY, ROY
3215 SAN MATEO STREET
CLEARWATER, FL 33759 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: D () Delete
Name: RAMSEY, ROY
Address: 16212 CHASTAIN DR
City-St-Zip: ODESSA, FL 33556

Title: VP () Delete
Name: BRADY, ROY
Address: 3215 SAN MATEO ST
City-St-Zip: CLEARWATER, FL 33759

Title: ST () Delete
Name: THORNTON, L HAROLD
Address: 342 SHORE DR
City-St-Zip: CLEARWATER, FL 33756

Title: D () Delete
Name: WEISS, JOHN
Address: 1700 HARMONY DR
City-St-Zip: CLEARWATER, FL 33756

Title: D () Delete
Name: CRUM, ELOMER
Address: 18220 OAK WAY DR
City-St-Zip: HUDSON, FL 34667

Title: D () Delete
Name: HELFAND, NORMAN
Address: 2606 MARY SUE ST
City-St-Zip: LARGO, FL 34644

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: RAMSEY, ROY
Address: 16212 CHASTAIN DR
City-St-Zip: ODESSA, FL 33556

Title: VP (X) Change () Addition
Name: TOPE, ERNEST R
Address: PO BOX 280542
City-St-Zip: TAMPA, FL 33682

Title: ST (X) Change () Addition
Name: THORNTON, L HAROLD
Address: 342 SHORE DR
City-St-Zip: ELLENTON, FL 34222

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

Title: D (X) Change () Addition
Name: BRADY, ROY
Address: 3215 SAN MATEO ST
City-St-Zip: CLEARWATER, FL 33759

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: L HAROLD THORNTON

ST

04/30/2009

Electronic Signature of Signing Officer or Director

Date