

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07338

FILED  
Jan 17, 2009  
Secretary of State

Entity Name: GULF COAST ECONOMICS CLUB, INC.

## Current Principal Place of Business:

8175 SIX PENCE DRIVE  
PENSACOLA, FL 32514 US

## New Principal Place of Business:

1228 STOW AVE.  
PENSACOLA, FL 32503 US

## Current Mailing Address:

P O BOX 1612  
PENSACOLA, FL 32501 US

## New Mailing Address:

1228 STOW AVE.  
PENSACOLA, FL 32503 US

FEI Number: 59-2676159

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WEST, MICHAEL S  
8175 SIX PENCE DRIVE  
PENSACOLA, FL 32514 US

## Name and Address of New Registered Agent:

SANCHEZ, DORIS J MRS  
1228 STOW AVE.  
PENSACOLA, FL 32503 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: DORIS SANCHEZ

01/17/2009

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: MRS. ( ) Delete  
Name: SANCHEZ, DORIS  
Address: 1228 STOW AVE.  
City-St-Zip: PENSACOLA, FL 32503

Title: MR ( ) Delete  
Name: SYLTE, TOM  
Address: PO BOX 230  
City-St-Zip: PENSACOLA, FL 32591

Title: MR ( ) Delete  
Name: AUSTIN, LES  
Address: 1517 WEST GARDEN STREET  
City-St-Zip: PENSACOLA, FL 32501

Title: MR (X) Delete  
Name: LACOUR, DICK  
Address: 501 COMMENDENCIA ST  
City-St-Zip: PENSACOLA, FL 32501

Title: MR (X) Delete  
Name: WEST, MICHAEL S  
Address: 8175 SIX PENCE DRIVE  
City-St-Zip: PENSACOLA, FL 32514 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change ( ) Addition  
Name: SANCHEZ, DORIS J MRS.  
Address: 1228 STOW AVE.  
City-St-Zip: PENSACOLA, FL 32503

Title: VP (X) Change ( ) Addition  
Name: SYLTE, TOM MR.  
Address: PO BOX 230  
City-St-Zip: PENSACOLA, FL 32591

Title: VP (X) Change ( ) Addition  
Name: AUSTIN, LES MR.  
Address: 1517 WEST GARDEN STREET  
City-St-Zip: PENSACOLA, FL 32501

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: DORIS SANCHEZ

PRES

01/17/2009

Electronic Signature of Signing Officer or Director

Date