

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000003125

FILED
Mar 16, 2012
Secretary of State

Entity Name: GULF COAST CHEVY DEALERS INC.

Current Principal Place of Business:

103 NEW WARRINGTON ROAD
PENSACOLA, FL 32506

New Principal Place of Business:

Current Mailing Address:

103 NEW WARRINGTON ROAD
PENSACOLA, FL 32506

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

ROBERT E. SICKLES, P.A.
100 SOUTH ASHLEY DRIVE - SUITE 500
TAMPA, FL 33602 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: DP
Name: MOORE, PETER R
Address: 103 NEW WARRINGTON ROAD
City-St-Zip: PENSACOLA, FL 32506

Title: DVP
Name: SANSING, ROBERT C
Address: 6200 PENSACOLA BLVD
City-St-Zip: PENSACOLA, FL 32505

Title: DS
Name: MASSEY, JAMES W
Address: 11241 OLD HWY 63 SOUTH
City-St-Zip: LUCEDALE, MS 39452

Title: DT
Name: MOSES, JOHN S
Address: 2900 GOVERNMENT BLVD
City-St-Zip: MOBILE, AL 36606

Title: D
Name: THOMPSON, TERRANCE J SR
Address: 1402 US HWY 98
City-St-Zip: DAPHNE, AL 36526

Title: D
Name: URQUHART, DONALD A JR
Address: 7581 AIRPORT BLVD
City-St-Zip: MOBILE, AL 36608

I hereby 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 all other like empowered.

SIGNATURE: ROBERT E. SICKLES, ATTORNEY

ATTY

03/16/2012

_____ Electronic Signature of Signing Officer or Director

_____ Date