2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 30, 2009
Secretary of State

DOCUMENT# N08000004486

Entity Name: INFORMATION TECHNOLOGY ASSOCIATION OF THE GULF COAST, INC.

Current Principal Place of Business:

19 SEASHORE DRIVE
PENSACOLA BEACH, FL 32561

New Principal Place of Business:

Current Mailing Address:

19 SEASHORE DRIVE
PENSACOLA BEACH, FL 32561

New Mailing Address:

FEI Number: 26-2589084 **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:

WEISNICHT, MARIA
19 SEASHORE DRIVE
PENSACOLA BEACH, FL 32561 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: HODGE, CHUCK
Address: 9192 STILLBRIDGE LANE
City-St-Zip: PENSACOLA, FL 32561

Title: D ( ) Delete
Name: ALDERMAN, GEORGE A. III
Address: 2421 BOWLING GREEN LANE
City-St-Zip: CANTONMENT, FL 32533

Title: D ( ) Delete
Name: WEISNICHT, MARIA
Address: 19 SEASHORE DRIVE
City-St-Zip: PENSACOLA BEACH, FL 32561

Title: D (X) Delete
Name: SPROWLS, ROBERT
Address: 31 W GARDEN ST, STE. 100
City-St-Zip: PENSACOLA, FL 32502

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: MARIA WEISNICHT TREA 06/30/2009
Electronic Signature of Signing Officer or Director — Date