

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N09000010379

**FILED**  
**Apr 22, 2011**  
**Secretary of State**

**Entity Name:** GCHS PARENTS FOR LAX, INC

**Current Principal Place of Business:**

5960 DOGWOOD WAY  
NAPLES, FL 34116

**New Principal Place of Business:**

151 PALM RIVER BLVD  
NAPLES, FL 34110

**Current Mailing Address:**

5960 DOGWOOD WAY  
NAPLES, FL 34116

**New Mailing Address:**

151 PALM RIVER BLVD  
NAPLES, FL 34110

**FEI Number:** 27-1181127

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MOORE, CHAD E  
5960 DOGWOOD WAY  
NAPLES, FL 34116 US

**Name and Address of New Registered Agent:**

CARTER, TRENT  
151 PALM RIVER BLVD  
NAPLES, FL 34110 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: TRENT CARTER

04/22/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: CARTER, TRENT  
Address: 151 PALM RIVER BLVD  
City-St-Zip: NAPLES, FL 34110

Title: S/T  
Name: WHITEMORE, KARI  
Address: 6031 SHADY OAKS LANE  
City-St-Zip: NAPLES, FL 34119

Title: VP  
Name: MELTON, MARY  
Address: 321 STEERFORTH CT  
City-St-Zip: NAPLES, FL 34110

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: TRENT CARTER

P

04/22/2011

Electronic Signature of Signing Officer or Director

Date