

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000003830

FILED  
Mar 18, 2012  
Secretary of State

**Entity Name:** GULF COUNTY DOMESTIC VIOLENCE TASK FORCE, INC

**Current Principal Place of Business:**

1000 CECIL G COSTIN SR BLVD.  
ROOM 136  
PORT SAINT JOE, FL 32456

**New Principal Place of Business:**

**Current Mailing Address:**

1000 CECIL G COSTIN SR BLVD.  
ROOM 136  
PORT SAINT JOE, FL 32456

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For (X)**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BRINKLEY, GEORGENE  
414 NAUTLIUS DR  
PORT SAINT JOE, FL 32456 US

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

ASHBROOK, DEBORAH S  
701 NAUTLIUS DR  
PORT SAINT JOE, FL 32456 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: DEBORAH S ASHBROOK

03/18/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: CHR  
Name: ASHBROOK, DEBORAH S  
Address: 701 NAUTILIUS DR  
City-St-Zip: PORT SAINT JOE, FL 32456

Title: DIR  
Name: BRINKLEY, GEORGE  
Address: 414 NAUTILIUS DR  
City-St-Zip: PORT SAINT JOE, FL 32456

Title: SEC  
Name: FREEMAN, JOANNE  
Address: 105 TYLER TERRACE  
City-St-Zip: PORT ST JOE, FL 32456

Title: DIR  
Name: MARTIN, PAMELA  
Address: 437 LAND DR  
City-St-Zip: WEWAHITCHKA, FL 32465

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: DEBORAH S ASHBROOK

CHR

03/18/2012

Electronic Signature of Signing Officer or Director

Date