

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11222

FILED
Feb 05, 2007
Secretary of State

Entity Name: GULF COAST ASSOCIATION OF GOVERNMENTAL PURCHASING OFFICERS, INC.

Current Principal Place of Business:

C/O PATTI ARMBRUSTER
P.O. BOX 398
FORT MYERS, FL 33901 US

Current Mailing Address:

C/O PATTI ARMBRUSTER
P.O. BOX 398
FORT MYERS, FL 33901 US

New Principal Place of Business:

JANE DALRYMPLE - CITY OF PUNTA GORDA
326 W MARION AVENUE
PUNTA GORDA, FL 33950 US

New Mailing Address:

JANE DALRYMPLE - CITY OF PUNTA GORDA
326 W MARION AVENUE
PUNTA GORDA, FL 33950 US

FEI Number: 59-2785131 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

DALRYNOLE, JANE
326 WEST MARION AVE.
PUNTA GORDA, FL 33950 US

Name and Address of New Registered Agent:

DALRYMPLE, JANE
326 WEST MARION AVE.
PUNTA GORDA, FL 33950 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: JANE DALRYMPLE

02/05/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: V () Delete
Name: LINDBACK, KATHLEEN M
Address: 18500 MURDOCK CIR
City-St-Zip: PT CHARLOTTE, FL 33948

Title: P () Delete
Name: SHENNAN, JANET K
Address: P.O. BOX 398
City-St-Zip: FORT MYERS, FL 33902

Title: S () Delete
Name: ARMBUSTER, PATTI
Address: P.O. BOX 398
City-St-Zip: FORT MYERS, FL 33902 US

Title: T () Delete
Name: DALRYMPLE, JANE
Address: 326 WEST MARION AVE.
City-St-Zip: PUNTA GORDA, FL 33950

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: LINDBACK, KATHLEEN M
Address: 18500 MURDOCK CIR
City-St-Zip: PT CHARLOTTE, FL 33948

Title: VP (X) Change () Addition
Name: ARMBRUSTER, PATTI
Address: P.O. BOX 398
City-St-Zip: FORT MYERS, FL 33902

Title: S (X) Change () Addition
Name: TUDOR, LISA
Address: 8099 COLLEGE PARKWAY
City-St-Zip: FORT MYERS, FL 33919 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: JANE DALRYMPLE

T

02/05/2007

Electronic Signature of Signing Officer or Director

Date