

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED

APR 25 PM 1:18

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N20247

1. Corporation Name

GULF COAST CHURCH OF CHRIST INC.

Principal Place of Business

715 OLD CUMY FIELD
PENSACOLA, FLA.
32523

Mailing Address

P.O. Box 18944
PENSACOLA, FLA.
32523

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 Zip 25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 Zip 30 Country

9. Name and Address of Current Registered Agent

RANDACK, WILLIE
1015 W. BOBE ST.
PENSACOLA, FLA.
32501

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

3. Date Incorporated or Qualified

4-21-87

4. FEI Number

59-2829292

Applied For
Not Applicable

5. Certificate of Status Desired []

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution []

\$5.00 May Be
Added to Fees

10. Name and Address of New Registered Agent

200002826002--2

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11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when not signing)

DATE

12. OFFICERS AND DIRECTORS

TITLE [] DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE [] DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE [] DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE [] DELETE

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STREET ADDRESS

CITY-ST-ZIP

TITLE [] DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE [] DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE ELDER/DIRECTOR [] Change [] Addition

12 NAME HARRY W. MACK JR.

13 STREET ADDRESS 9825 GINKGO DR.

14 CITY-ST-ZIP PENSACOLA, FLA. 32506

21 TITLE ELDER/T [] Change [] Addition

22 NAME WILLIE RANDACK

23 STREET ADDRESS 1015 W. BOBE ST.

24 CITY-ST-ZIP PENSACOLA, FLA. 32501

31 TITLE PRESIDENT/P [] Change [] Addition

32 NAME NATHANIEL B. NICKS

33 STREET ADDRESS 8132 CHAPMAN ST

34 CITY-ST-ZIP PENSACOLA, FLA. 32514

41 TITLE [] Change [] Addition

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

51 TITLE [] Change [] Addition

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP

61 TITLE [] Change [] Addition

62 NAME

63 STREET ADDRESS

64 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered

SIGNATURE:

HARRY W. MACK JR.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-1-99 850 453-6667

Date

Daytime Phone #

CR2E037 (11/98)