

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N20247

FILED  
Sep 04, 2007  
Secretary of State

**Entity Name:** GULF COAST CHURCH OF CHRIST, INC.

**Current Principal Place of Business:**

719 OLD CORRY FIELD RD.  
PENSACOLA, FL 32523

**New Principal Place of Business:**

719 OLD CORRY FIELD RD.  
PENSACOLA, FL 32506

**Current Mailing Address:**

P.O. BOX 18947  
PENSACOLA, FL 32523

**New Mailing Address:**

719 OLD CORRY FIELD RD.  
PENSACOLA, FL 32506

**FEI Number:** 59-2829292      **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:**

NICKS, NATHANIEL B.  
6889 FOXCHASE CIRCLE  
PENSACOLA, FL 32506 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: DT ( ) Delete  
Name: BLUE, KERRY T  
Address: 1301 N. OLD CORRY FIELD RD. L-13  
City-St-Zip: PENSACOLA, FL 32506

Title: DT (X) Delete  
Name: WILLIE, RANDALL  
Address: 1015 W. BOBE  
City-St-Zip: PENSACOLA, FL 32501

Title: PD ( ) Delete  
Name: NICKS, NATHANIEL B  
Address: 6889 FOXCHASE CIR.  
City-St-Zip: PENSACOLA, FL 32506 US

Title: PCSD ( ) Delete  
Name: NICKS, NATHANIEL B  
Address: 6889 FOXCHASE CIR.  
City-St-Zip: PENSACOLA, FL 32506

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: DT (X) Change ( ) Addition  
Name: WELDON, ADRAIN  
Address: 719 OLD CORRY FIELD RD.  
City-St-Zip: PENSACOLA, FL 32506

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: NATHANIEL B. NICKS

PCSD

09/04/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date