

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N22128

FILED
Jan 06, 2009
Secretary of State

Entity Name: GREAT GULF COAST ARTS FESTIVAL, INC.

Current Principal Place of Business:

17 S. PALAFOX STREET
SUITE #335
PENSACOLA, FL 32502

New Principal Place of Business:

Current Mailing Address:

3519 BAYSWATER DR
PENSACOLA, FL 32514

New Mailing Address:

FEI Number: 59-2884632

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PERRIGO, CRAIG
3519 BAYSWATER DR.
PENSACOLA, FL 32514 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: D () Delete
Name: GAZANI, JAY
Address: 3006 CORAL STRIP PKY
City-St-Zip: GULF BREEZE, FL 32563

Title: D () Delete
Name: MAPOLES, PAULA LOU
Address: 7150 PRINTERS ALLEY
City-St-Zip: MILTON, FL

Title: S () Delete
Name: MERRITT, DONNA,
Address: 3011 BLACKSHEAR AVE
City-St-Zip: PENSACOLA, FL

Title: T () Delete
Name: PERRIGO, CRAIG,
Address: 3519 BAYSWATER DR.
City-St-Zip: PENSACOLA, FL

Title: D () Delete
Name: WARNER, SUE
Address: 430 BELLE CHASSE WAY
City-St-Zip: PENSACOLA, FL 32506

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: P (X) Change () Addition
Name: PERRY, CRAIG
Address: 3803 NORTH 12TH AVE
City-St-Zip: PENSACOLA, FL 32503

Title: S (X) Change () Addition
Name: MERRITT, DONNA,
Address: 3011 BLACKSHEAR AVE
City-St-Zip: PENSACOLA, FL 32503

Title: T (X) Change () Addition
Name: PERRIGO, CRAIG,
Address: 3519 BAYSWATER DR.
City-St-Zip: PENSACOLA, FL 32514

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

Title: VP () Change (X) Addition
Name: ZACHOW, JO
Address: 1600 E. STRONG ST
City-St-Zip: PENSACOLA, FL 32501

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: CRAIG PERRIGO

T

01/06/2009

Electronic Signature of Signing Officer or Director

Date