

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.  
AMOUNT DUE ON OR BEFORE 09/30/98: \$6.25 (if DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25)

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # N24938

(5)

1. Corporation Name

GULF COAST SERTOMA CLUB, INC.

Principal Place of Business

6400 MANATEE AVE. W.  
SUITE J  
BRADENTON FL 34209

Mailing Address

6400 MANATEE AVE. W.  
SUITE J  
BRADENTON FL 34209

2. Principal Place of Business

21 | 7207-17th Ave NW  
Suite, Apt. #, etc.

22 | City & State

23 | Bradenton FL

24 | 34209

25 | USA

2a Mailing Address

26 | 7207-17th Ave NW  
Suite, Apt. #, etc.

27 | City & State

28 | Bradenton FL

29 | 34209

30 | USA

9. Name and Address of Current Registered Agent

PAVICH, PAUL R  
-6400 MANATEE AVE. W.  
SUITE J  
BRADENTON FL 34209-

81 Name

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

83 7207-17th Street NW

84 City Bradenton

85 FL 34209

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 reinstating)

9/21/98

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP
D	MIKE L. KOEBEL	2305-45TH CT W	BRADENTON FL
D	SPENCELEY, PAUL	718 20TH ST. W.	BRADENTON FL 34209
D	HOLWAY, FLOYD	1303 RIVERVIEW CIR.	BRADENTON FL 34209
D	PAVICH, PAUL R	7207 17TH AVE. N.W.W., SUITE J	BRADENTON FL 34209

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP
1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-STATE-ZIP
2.1 TITLE	2.2 NAME	2.3 STREET ADDRESS	2.4 CITY-STATE-ZIP
3.1 TITLE	3.2 NAME	3.3 STREET ADDRESS	3.4 CITY-STATE-ZIP
4.1 TITLE	4.2 NAME	4.3 STREET ADDRESS	4.4 CITY-STATE-ZIP
5.1 TITLE	5.2 NAME	5.3 STREET ADDRESS	5.4 CITY-STATE-ZIP
6.1 TITLE	6.2 NAME	6.3 STREET ADDRESS	6.4 CITY-STATE-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.

SIGNATURE

Paul R. Pavich

Paul R. Pavich

9/21/98

941-373-3583

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (5/98)

FILED  
Oct 08 1998 8:00am  
Secretary of State

