

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # N34550 (6)

1. Corporation Name

GULF COAST SENIOR GAMES, INC.



Principal Place of Business

Mailing Address

1201 6TH AVE W.
2ND FLOOR
BRADENTON FL 34205
US

1201 6TH AVE W
2ND FLOOR
BRADENTON FL 34205
US

3. Date Incorporated or Qualified
10/03/1989

3a. Date of Last Report
03/23/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

4. FEI Number
65-0155278

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**

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**MCGUIRE AND PARRY
1001 THIRD AVENUE WEST
SUITE 600
BRADENTON FL 34205**

81 Name

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

83

84 City

FL

85 Zip Code

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

(If title Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD ☒ DELETE

NAME **MCQUILLEN, REBECCA**
STREET ADDRESS **511 63RD AVE DR W**
CITY - ST - ZIP **BRADENTON FL**

TITLE V ☒ DELETE

NAME **SHAPIRO, BARBARA**
STREET ADDRESS **1201 6TH AVENUE W. NATIONSBANK**
CITY - ST - ZIP **BRADENTON FL**

TITLE V ☐ DELETE

NAME **WARD, BILL**
STREET ADDRESS **5502 33RD AVE DR W**
CITY - ST - ZIP **BRADENTON FL**

TITLE SD ☒ DELETE

NAME **TURNER, MARCIA**
STREET ADDRESS **912 AMERICAN EAGLE BLVD**
CITY - ST - ZIP **SUN CITY CENTER FL**

TITLE TD ☐ DELETE

NAME **DODD, SUSAN**
STREET ADDRESS **7200 55TH AVE EAST**
CITY - ST - ZIP **BRADENTON FL**

TITLE D ☐ DELETE

NAME **LABELL, DAVE**
STREET ADDRESS **102 MANATEE AVE W, BRADENTON HERALD**
CITY - ST - ZIP **BRADENTON FL**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PD ☒ Change ☐ Addition

1.2 NAME **Michael Williams**
1.3 STREET ADDRESS **3300 26th Street West**
1.4 CITY - ST - ZIP **Bradenton, FL 34205**

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

4.1 TITLE SD ☒ Change ☐ Addition

4.2 NAME **Wendy Bohnenkamper**
4.3 STREET ADDRESS **1886 59th Street West**
4.4 CITY - ST - ZIP **Bradenton, FL 34209**

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/3/96 941-255-1200

CR2E037 (12/95)