2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2006
Secretary of State

DOCUMENT# N34681

Entity Name: GULF COAST MORTGAGE BANKERS ASSOCIATION, INC.

Current Principal Place of Business:

2305 45TH COURT W
BRADENTON, FL 34209 US

New Principal Place of Business:

Current Mailing Address:

2305 45TH COURT W
BRADENTON, FL 34209 US

New Mailing Address:

FEI Number: 65-0127021 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

KOEBEL, MICHAEL L
2305 45TH COURT W.
BRADENTON, FL 34209 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:	P	( ) Delete
Name:	BURNS, KATHY	
Address:	3400 S. TAMIAMI TRAIL	
City-St-Zip:	SARASOTA, FL 34239	
Title:	S	( ) Delete
Name:	SHARYL, SMITH	
Address:	783 S. ORANGE AVE	
City-St-Zip:	SARASOTA, FL 34239	
Title:	T	( ) Delete
Name:	KOEBEL, MIKE	
Address:	2304 45TH CT,W	
City-St-Zip:	BRADENTON, FL 34209	
Title:	VP	( ) Delete
Name:	LUSSIER, GEORGES	
Address:	240 S.PINEAPPLE	
City-St-Zip:	SARASOTA, FL 34236	
Title:	D	(X) Delete
Name:	ROBERT, WARD	
Address:	401 N. CATTLEMEN ROAD, STE. 104	
City-St-Zip:	SARASOTA, FL 34232	
Title:	D	( ) Delete
Name:	MASUCCI, MARIA	
Address:	2000 WEBBER ST	
City-St-Zip:	SARASOTA, FL 34239	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	VP	(X) Change ( ) Addition
Name:	LUSSIER, GEORGES	
Address:	1800 2ND ST., STE 104	
City-St-Zip:	SARASOTA, FL 34236	
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 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: MICHAEL L. KOEBEL T 04/23/2006

Electronic Signature of Signing Officer or Director — Date