2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 09, 2008
Secretary of State

DOCUMENT# N48442

Entity Name: GULF COAST 10-13 CLUB, INC.

Current Principal Place of Business:

2500 AQUILOS CT
PORT CHARLOTTE, FL 33952

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 495786
PORT CHARLOTTE, FL 339495786

New Mailing Address:

FEI Number: 59-2825709 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WRIGHT, EDWARD J
2500 AQUILOS CT
PORT CHARLOTTE, FL 33952 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:	BARKER, EDWARD	
Address:	6405 ACORNA BLVD	
City-St-Zip:	PUNTA GORDA, FL 33982	
Title:	V	( ) Delete
Name:	WRIGHT, EDWARD	
Address:	2500 AQUILOS CT	
City-St-Zip:	PT CHARLOTTE, FL 33952	
Title:	T	( ) Delete
Name:	LUBRANO, MICHAEL	
Address:	9241 NEW MARTINSVILLE AVE	
City-St-Zip:	ENGLEWOOD, FL 34224	
Title:	D	( ) Delete
Name:	RAPSISARDI, JERRY	
Address:	502 LOWALL AVE	
City-St-Zip:	PORT CHARLOTTE, FL 33952	
Title:	D	( ) Delete
Name:	SCLAFANI, ANTHONY	
Address:	7438 CARAMBOLS CT	
City-St-Zip:	PUNTA GORDA, FL 33955	
Title:	D	( ) Delete
Name:	PLESCIA, JERRY	
Address:	7335 SATSUMA DR	
City-St-Zip:	PUNTA GORDA, FL 33955	

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:	( ) 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: MICHAEL LUBRANO T 01/09/2008

Electronic Signature of Signing Officer or Director — Date