

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 27, 2003 8:00 am
Secretary of State

05-27-2003 90161 039 ****61.25

DOCUMENT # N49302

1. Entity Name

GULF COAST ST. DAVID'S WELSH SOCIETY, INC.



Principal Place of Business

**2833 VALLEY FORGE ST.
SARASOTA FL 34231**

Mailing Address

**2833 VALLEY FORGE ST.
SARASOTA FL 34231**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **65-0336746**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

☒ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

WILLIAMS, JOHN L.

~~8200 S TAMiami TR~~

SARASOTA FL 34231

2833 Valley Forge St

7. Name and Address of New Registered Agent

Name

WILLIAMS, JOHN L. no change

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

2833 VALLEY FORGE ST. change

City

SARASOTA no change

FL

Zip Code

34231

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

John L. Williams

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

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9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **PD** ☐ Delete
NAME **AVANWY, ADAMS E.M.**
STREET ADDRESS **554 PACKWOOD AVE.**
CITY-ST-ZIP **NORTH PORT FL 34287**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **D** ☐ Delete
NAME **LEWIS, ROBERT**
STREET ADDRESS **1209 GULF COAST BLVD**
CITY-ST-ZIP **VENICE FL 34292**

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **D** ☐ Delete
NAME **WILLIAMS, RUSSELL**
STREET ADDRESS **1528 VERMEER DR.**
CITY-ST-ZIP **NOKOMIS FL 34275**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **TD** ☐ Delete
NAME **GIGANTI, SUSAN D**
STREET ADDRESS **4426 CAYO GRANDE DR**
CITY-ST-ZIP **SARASOTA FL 34233**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **D** ☐ Delete
NAME **HUGHES, DONALD**
STREET ADDRESS **2834 CONCORD ST.**
CITY-ST-ZIP **SARASOTA FL 34231**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **V** ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME **D JAMES FOUNTAINE**
STREET ADDRESS **736 Seagrass Ave.**
CITY-ST-ZIP **Sarasota, FL 34237**

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE *James Fountaine* President

5/23/03 (941) 926-8555

CR2E037 (10/02)