## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N51358

FILED Apr 04, 2007 Secretary of State

Entity Name: GULF COAST YOUTH CHOIRS, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

P O BOX 273656 2902 WEST FLETCHER AVENUE

TAMPA, FL 336883656 TAMPA, FL 33618

**Current Mailing Address: New Mailing Address:** 

P O BOX 273656 TAMPA, FL 336883656

FEI Number: 59-3142234 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

GACKLE, LYNNE 18604 CHEMILLE DRIVE LUTZ, FL 33558

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:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition () Delete SALYERS, JANET HOWARD, VANCE Name: Name:

13916 PEPPERELL DR. Address: 19503 FRENCH LACE DRIVE Address:

City-St-Zip: TAMPA, FL 33624 City-St-Zip: LUTZ, FL 33558

Title: D. V () Delete Title: () Change () Addition

PELHAM, NADINE Name: Name: Address: 17333 SIMMONS RD. Address: City-St-Zip: LUTZ, FL 33549 City-St-Zip:

Title: D, T () Delete Title: (X) Change ( ) Addition

HOWARD, VAN Name: SALYERS, JANET Name: 19503 FRENCH LACE DR. 13916 PEPPERELL DRIVE Address: Address:

City-St-Zip: LUTZ. FL 33558 City-St-Zip: TAMPA, FL 33624

Title: D, S ( ) Delete Title: () Change () Addition

Name: STRAWBRIDGE, DIANA Name: 6012 HAMMOCK WOODS DR. Address: Address: City-St-Zip: ODESSA, FL 33556 City-St-Zip:

Title: () Delete Title: () Change () Addition

JOHNSTON, DOUG Name: Name: 12604 N. 53 ST. Address: Address: City-St-Zip: TEMPLE TERRACE, FL 33617 City-St-Zip:

Title: () Delete Title: (X) Change ( ) Addition

MCGINNIS, MARY VEDHANAYAGAM, ARUN Name: Name: Address: 13110 TOWNSEND LN. Address: 6425 RENWICK CIRCLE TAMPA, FL 33612 TAMPA, FL 33647 City-St-Zip: 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: VANCE HOWARD Ρ 04/04/2007