

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Feb 25, 2009
Secretary of State**

DOCUMENT# N95000004251

Entity Name: GULF COAST BLUEGRASS MUSIC ASSOCIATION, INC.

Current Principal Place of Business:

5604 RICHMOND COURT
PACE, FL 32571

New Principal Place of Business:

Current Mailing Address:

5604 RICHMOND COURT
PACE, FL 32571

New Mailing Address:

FEI Number: 59-3238461 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COOLEY, ELIZABETH
5604 RICHMOND COURT
PACE, FL 32571 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: D () Delete
Name: SAMUEL, CHARLES
Address: 4569 SOUTHERN PLACE
City-St-Zip: PACE, FL 32571 US

Title: VP () Delete
Name: BLANTON, MIKE
Address: 4771 EASTER STREET
City-St-Zip: PACE, FL 32571

Title: S () Delete
Name: CONATSER, APRIL
Address: 4868 HWY 196
City-St-Zip: MOLINO, FL 32577

Title: T () Delete
Name: SHRYOCK, MILTON
Address: 4841 ALEFF ROAD
City-St-Zip: PACE, FL 32571

Title: D () Delete
Name: ECKENRODE, CLINT
Address: 301 LINCOLN DR.
City-St-Zip: FORT WALTON BEACH, FL 32547

Title: D () Delete
Name: ROWELL, KEITH
Address: 6240 BRIGADIER RD
City-St-Zip: MILTON, FL 32571

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S (X) Change () Addition
Name: COOLEY, ELIZABETH
Address: 5604 RICHMOND COURT
City-St-Zip: PACE, FL 32571

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: ELIZABETH COOLEY

SEC

02/25/2009

Electronic Signature of Signing Officer or Director

_____ Date