

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000004251

FILED  
Feb 17, 2011  
Secretary of State

**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: P  
Name: BATES, DIANE P  
Address: 5026 WILLARD NORRIS ROAD  
City-St-Zip: MILTON, FL 32570 US

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

Title: S  
Name: COOLEY, ELIZABETH S  
Address: 5604 RICHMOND COURT  
City-St-Zip: PACE, FL 32571

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

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

Title: D  
Name: BATES, O.D. D  
Address: 5026 WILLARD NORRIS ROAD  
City-St-Zip: MILTON, FL 32570

I hereby 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 all other like empowered.

SIGNATURE: ELIZABETH COOLEY

SEC.

02/17/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date