

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000000853

FILED
Jan 11, 2009
Secretary of State

Entity Name: GULF COAST AREA REPEATER CLUB, INC.

Current Principal Place of Business:

PO BOX 61411
FORT MYERS, FL 33906

New Principal Place of Business:

616 JACKSON AV
LEHIGH ACRES, FL 33972

Current Mailing Address:

PO BOX 61411
FORT MYERS, FL 33906

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

PENEZIC, DAVID
616 JACKSON AVE
LEHIGH ACRES, FL 33972 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: PD () Delete
Name: PAVELA, WILLIAM
Address: 3317 NW JUANITA PLACE
City-St-Zip: CAPE CORAL, FL 33904

Title: ST () Delete
Name: GURKA, STELLA
Address: 610 MAPLE AVE. NORTH
City-St-Zip: LEHIGH, FL 33972

Title: T () Delete
Name: PENEZIC, DAVID
Address: 616 JACKSON AVE
City-St-Zip: LEHIGH ACRES, FL 33972

Title: D () Delete
Name: DAVIES, IVAN L SR
Address: 2243 GORHAM AVE
City-St-Zip: FORT MYERS, FL 33907

Title: VD () Delete
Name: ISTENES, CHARLES JR
Address: 210 CAROL DR
City-St-Zip: FORT MYERS, FL 33905

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:

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: DAVID PENEZIC

T

01/11/2009

Electronic Signature of Signing Officer or Director

Date