

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N98000000853

**FILED**  
**Jan 18, 2010**  
**Secretary of State**

**Entity Name:** GULF COAST AREA REPEATER CLUB, INC.

**Current Principal Place of Business:**

616 JACKSON AV  
LEHIGH ACRES, FL 33972

**New Principal Place of Business:**

**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  
Name: PAVELA, WILLIAM  
Address: 3317 NW JUANITA PLACE  
City-St-Zip: CAPE CORAL, FL 33904

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

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

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

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

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: DAVID PENEZIC

T

01/18/2010

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

\_\_\_\_\_  
Date