

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000002875

FILED
Mar 12, 2005
Secretary of State

Entity Name: GULFCOAST BIBLE FELLOWSHIP, INC.

Current Principal Place of Business:

2740 BAYSHORE DRIVE
UNIT 4
NAPLES, FL 34112

New Principal Place of Business:

Current Mailing Address:

2740 BAYSHORE DRIVE
UNIT 4
NAPLES, FL 34112

New Mailing Address:

FEI Number: 65-0933084

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MCCLELLAN, PHILLIP M JR
4230 MOHAWK PL.
NAPLES, FL 34112 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: DP () Delete
Name: MCCLELLAN, PHILLIP M JR
Address: 4230 MOHAWK PL.
City-St-Zip: NAPLES, FL 34112

Title: D () Delete
Name: SIMS, ARTHUR T
Address: 1410 17TH ST. S.W.
City-St-Zip: NAPLES, FL 34117

Title: D () Delete
Name: HEDDEN, WILLARD
Address: 24542 RED ROBIN RD.
City-St-Zip: BONITA SPRINGS, FL 34135

Title: S () Delete
Name: ANDERSON, SUSAN
Address: 3675 23RD AVE. S.W.
City-St-Zip: NAPLES, FL 34112

Title: T () Delete
Name: MCCLELLAN, JANET
Address: 4230 MOHAWK PL.
City-St-Zip: NAPLES, FL 34112

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 for the exemption stated in Section 119.07(3)(i), 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: PHILLIP M MCCLELLAN, JR

DP

03/12/2005

Electronic Signature of Signing Officer or Director

_____ Date