

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 749531

**Entity Name:** GULF COAST BAPTIST CHURCH INC. OF PENSACOLA,  
FLORIDA**Current Principal Place of Business:**1499 CHEMSTRAND RD.  
CANTONMENT, FL 32533**Current Mailing Address:**1499 CHEMSTRAND RD  
CANTONMENT, FL 32533**FEI Number:** 65-0858762**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**DANIEL, DENNIS  
1499 CHEMSTRAND RD.  
CANTONMENT, FL 32533 US*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:** DENNIS DANIEL

04/09/2016

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            DANIEL, DENNIS  
Address        1499 CHEMSTRAND RD.  
City-State-Zip: CANTONMENT FL 32533

Title            DIRECTOR  
Name            TOWNSEND, MICHAEL  
Address        1499 CHEMSTRAND RD.  
City-State-Zip: CANTONMENT FL 32533

Title            TREASURER  
Name            WILLIAMS, STANLEY  
Address        1499 CHEMSTRAND RD.  
City-State-Zip: CANTONMENT FL 32533

Title            DIRECTOR  
Name            DEWHURST, ROBERT  
Address        1499 CHEMSTRAND RD  
City-State-Zip: CANTONMENT FL 32533

Title            VP, SECRETARY, DIRECTOR  
Name            GEISER, CHARLES  
Address        1499 CHEMSTRAND RD.  
City-State-Zip: CANTONMENT FL 32533

Title            DIRECTOR  
Name            LUNDELL, BRANDON  
Address        1499 CHEMSTRAND RD.  
City-State-Zip: CANTONMENT FL 32533

Title            DIRECTOR  
Name            LEATHERS, BILL  
Address        1499 CHEMSTRAND RD  
City-State-Zip: CANTONMENT FL 32533

Title            DIRECTOR  
Name            THOMAS, STEVE  
Address        1499 CHEMSTRAND ROAD  
City-State-Zip: CANTONMENT FL 32533

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*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:** STANLEY G WILLIAMS**TREASURER**

04/09/2016

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title	DIRECTOR
Name	ORDWAY, ALAN
Address	1499 CHEMSTRAND ROAD
City-State-Zip:	CANTONMENT FL 32533