2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N26099

Entity Name: EXXONMOBIL GULF COAST ANNUITANT CLUB, INC.

FILED
Jan 18, 2018
Secretary of State
CC0271536639

Current Principal Place of Business:

9641 HIGHWAY 97 CENTURY, FL 32535

Current Mailing Address:

167 SEDGEFIELD AVE. FAIRHOPE, AL 36532 US

FEI Number: 63-0917752 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

COOK., WILLIAM EMR 9641 HIGHWAY 97 CENTURY, FL 32535 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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title	TREA	Title	D

NameCORREA, ALEJANDRO HTREASURNameCOOK, WILLIAM PAST. PAddress167 SEDGEFIELD AVE.Address9641 HIGHWAY 97City-State-Zip:FAIRHOPE AL 36532City-State-Zip: CENTURY FL 32535

Title PRESIDENT Title DIRECTOR

NameHENRY, KIRSEYNameDONALDSON, RON SEC.Address188 SHIPP STAddress6607 WILLOWBRIDGE DR.City-State-Zip:CASTLEBERRY AL 36432City-State-Zip:FAIRHOPE AL 36532

Title D Title DIRECTOR

Name SMITH, RONNIE DIRECTO Name LAY, WILLIAM DIRECTOR

Address 500 W. ROACH STREET Address P. O. BOX 35

City-State-Zip: MC DAVID FL 32568 City-State-Zip: GULF BREEZE FL 32562

Title V PRESIDENT, VP Title SECRETARY

NameMC CARTY, DODD VPNameVILARREAL, CHRISTINEAddressP.O. BOX 398Address2575 PINE FOREST RDCity-State-Zip:LOXLEY AL 36551City-State-Zip: CANTONEMENT FL 36533

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: ALEJANDRO M. CORREA TREASURER 01/18/2018