

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

DOCUMENT# F94000005697

**FILED**  
**Jan 27, 2016**  
**Secretary of State**  
**CC0910920172**

**Entity Name:** GOODWILL INDUSTRIES/EASTER SEALS OF THE GULF COAST, INC.

**Current Principal Place of Business:**

2440 GORDON SMITH DR  
MOBILE, AL 36617

**Current Mailing Address:**

2440 GORDON SMITH DR  
MOBILE, AL 36617 US

**FEI Number: 63-0363472**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

HARKINS, FRANK  
15 E. BRENT LANE  
PENSACOLA, FL 32503 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           TREASURER  
Name           OMAINSKY, BOB  
Address        501 SPRINGPARK DR E  
City-State-Zip: MOBILE AL 36608

Title           CHAIRMAN  
Name           D'OLIVE, PETER  
Address        PO BOX 70047  
City-State-Zip: MOBILE AL 36670

Title           VC  
Name           LOTT, FRANK III  
Address        PO BOX 190879  
City-State-Zip: MOBILE AL 36619

Title           P  
Name           HARKINS, FRANK  
Address        2448 GORDON SMITH DR.  
City-State-Zip: MOBILE AL 36617

Title           CFO  
Name           LARRY, CINDY  
Address        2440 GORDON SMITH DRIVE  
City-State-Zip: MOBILE AL 36617

Title           SECRETARY  
Name           ROSS, JAY  
Address        11 NORTH WATER ST  
                  SUITE 23200  
City-State-Zip: MOBILE AL 36602

*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: CINDY LARRY**

**CFO**

**01/27/2016**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date