

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 704284

FILED
Feb 20, 2008
Secretary of State

Entity Name: GOLD COAST COIN CLUB, INC.

Current Principal Place of Business:

4107 FILLMORE ST.
HOLLYWOOD, FL 33021

New Principal Place of Business:

Current Mailing Address:

P.O.BOX 81-3732
HOLLYWOOD, FL 33081

New Mailing Address:

FEI Number: 59-1794215

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LANE, ROGER D.
4107 FILLMORE ST.
HOLLYWOOD, FL 33021 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: VP () Delete
Name: ESHLEMAN, MARK
Address: 3772 NW 23 MANOR
City-St-Zip: COCONUT CREEK, FL 33066

Title: T () Delete
Name: LANE, ROGER D,
Address: 4107 FILLMORE ST.
City-St-Zip: HOLLYWOOD, FL 33021

Title: D () Delete
Name: KLEIN, STAN
Address: PO BOX 81-4866
City-St-Zip: HOLLYWOOD, FL 33081

Title: P () Delete
Name: BLATTER, RICHARD
Address: 3300 N STATE ROAD 7, PO BOX H-698
City-St-Zip: HOLLYWOOD, FL 33321

Title: D () Delete
Name: CERNOBYL, STEPHEN
Address: 5201 CLEVELAND ST
City-St-Zip: HOLLYWOOD, FL 33021

Title: VP () Delete
Name: BERNARD, DENIS
Address: P O BOX 1552
City-St-Zip: DANIA BEACH, FL 33004

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:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: ROGER D LANE

T

02/20/2008

Electronic Signature of Signing Officer or Director

Date