## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

## Jan 23, 2004 08:00 AM DOCUMENT # 719233 **Secretary of State** 1. Entity Name THE GOLD COAST CHAPTER, INC. OF THE DOOR AND HARDWARE INSTITUTE Principal Place of Business Mailing Address C/OBILL SPRIGG 6351 N.W. 28TH WAY STE A FORT LAUDERDALE FL 33309 C/OBILL SPRIGG 6351 N.W. 28TH WAY STE A FORT LAUDERDALE FL 33309 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E037 (11/03) MOORE City & State City & State Applied For 4. FFI Number NO-T APPLICABLE Not Applicat Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name MARKO, EDWARD J., ESQ. Street Address (P.O. Box Number is Not Acceptable) MARKO & STEPHANY 1401 E. BROWARD BLVD., STE. 201 FORT LAUDERDALE FL 33301 City Zip Code 8. 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. I am familiar with, and access the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable DATE (NOTE, Registered Agent signature required when reinstating) 9. Election Campaign Financing FILE NOW: FEE IS \$61.25 Make Check Payable to **\$5.00** May Be Trust Fund Contribution. Added to Fees Florida Department of State Due By May 1, 2004 10, OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 Change TITLE Delete RILE STALLCUP, JOHN U0000001200 NAME NAME 6351 N.W. 28TH WAY, STE A 01/23/04-80060-019 61.25 STREET ADDRESS STREET ADDRESS FORT LAUDERDALE FL 33309 CITY-ST-ZIP CITY-ST-ZIP Add " TIBLE ☐ Delete THELE Change STONE, RICHARD NAME MAME 6921 SW 16 ST. STREET ADDRESS STREET ADDRESS PEMBROKE PINES FL 33023 CRY - \$1 - 21P CITY-ST- BP Delete DBLE BRLE ☐ Change T Address PAYEN, TVES NAME NAME 2000 NW 190 AVE. STREET ADDRESS STREET ADDRESS PEMBROKE PINES FL 33029 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Add 1 TITLE SPRIGG, BILL A A LOF MARKE 6351 N.W. 28TH WAY, STE A STREET ADDRESS STREET ADDRESS FORT LAUDERDALE FL 33309 CITY-ST-ZIP City-ST-ZiP TITLE Delete 3133 F Change TT Add" MALKE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIF CITY+ST-ZIP □ 4 ' " THEF ☐ Change TETLE Delete NAME NAME STREET ADDRESS STREET ADDRESS CAY-ST-ZIP CITY-ST-ZIP

**FILED** 

12. I hereby certify that the information supplied with this filing does not qualify 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 signature shall have the same legal effect as if made under oath; that I am an officer or direction 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 in Block 10 or Block 11 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: WILLIAM L. SPRIGG I 1/21/04 954-978-2388