2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 10, 2006
Secretary of State

DOCUMENT# 742278

Entity Name: FLORIDA GOLD COAST CHAPTER OF THE SOCIETY OF CHARTERED PROPERTY AND CASUALTY UNDERWRITERS, INC.

Current Principal Place of Business:

8164C ANDOVER CT
WEST PALM BEACH, FL 33406

New Principal Place of Business:

Current Mailing Address:

8164C ANDOVER CT
WEST PALM BEACH, FL 33406

New Mailing Address:

FEI Number: 59-1843498 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HUBBART, PAMELA
8164C ANDOVER CT
WEST PALM BEACH, FL 33406 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: SPD ( ) Delete
Name: LOVGREN, LORI
Address: 901 PENINSULA CORP CIRCLE
City-St-Zip: BOCA RATON, FL 33421

Title: D ( ) Delete
Name: DRESBACK, DONALD,
Address: 118 SEA ISLAND TERR
City-St-Zip: BOCA RATON, FL 00000,

Title: TD ( ) Delete
Name: HUBBART, PAMELA
Address: 81640 ANDOVER CT.
City-St-Zip: WEST PALM BEACH, FL 33406

Title: VP ( ) Delete
Name: MCINTOSH, CAROLYN
Address: 12212 153RD CT. N.
City-St-Zip: JUPITER, FL 33478

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: SPD (X) Change ( ) Addition
Name: FRIEDLANDER, DAVID
Address: 1710 N. UNIVERSITY DRIVE
City-St-Zip: PEMBROKE PINES, FL 33024

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

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

Title: VP (X) Change ( ) Addition
Name: REILLY, MARY ANN
Address: 2410 DEER CREEK CC BLVD
City-St-Zip: DEERFIELD BEACH, FL 33442

Title: S ( ) Change (X) Addition
Name: JACKSON, JEFF
Address: P. O. BOX 9507
City-St-Zip: FT. LAUDERDALE, FL 33310

I hereby certify that the information supplied with this filing does not qualify for the 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: PAMELA HUBBART TD 01/10/2006

Electronic Signature of Signing Officer or Director — Date