

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 10, 2003 8:00 am
Secretary of State

01-13-2003 90474 021 ****61.25

DOCUMENT # 742278

1. Entity Name

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



Principal Place of Business

**8164C ANDOVER CT
WEST PALM BEACH FL 33408**

Mailing Address

**8164C ANDOVER CT
WEST PALM BEACH FL 33408**

55005799

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number **59-1843498**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**HUBBART, PAMELA
8164C ANDOVER CT
WEST PALM BEACH FL 33408**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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 accept the obligations of registered agent.

SIGNATURE

PAMELA HUBBART

Pamela Hubbard

1-6-03

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE	VP	☐ Delete
NAME	STINSON, STEVE	
STREET ADDRESS	7775 FLAGLER DR STE 5002	
CITY-ST-ZIP	WEST PALM BEACH FL 33401	
TITLE	SD	☐ Delete
NAME	VALLEY, JOYCE	
STREET ADDRESS	901 PENINSULA CORP CIRCLE	
CITY-ST-ZIP	BOCA RATON FL 33421	
TITLE	D	☐ Delete
NAME	DRESSBACK, DONALD	
STREET ADDRESS	118 SEA ISLAND TERR	
CITY-ST-ZIP	BOCA RATON, FL 00000	
TITLE	P	☒ Delete
NAME	JOHNS, CHERYL	
STREET ADDRESS	11065 NW 39TH ST #303	
CITY-ST-ZIP	SUNRISE FL 33351	
TITLE	SD	☒ Delete
NAME	GOBALASINGHAM, SABA	
STREET ADDRESS	700 N HIATUS ROAD STE 205	
CITY-ST-ZIP	HOLLYWOOD FL 33026	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	VP	☒ Change ☐ Addition
NAME	STINSON, STEVE	
STREET ADDRESS	224 2ND TERRACE	
CITY-ST-ZIP	PALM BCH GARDENS, FL 33418	
TITLE	VP	☐ Change ☒ Addition
NAME	PAMELA HUBBART	
STREET ADDRESS	8164C ANDOVER CT	
CITY-ST-ZIP	WEST PALM BEACH, FL 33408	
TITLE	VP	☐ Change ☒ Addition
NAME	CAROLYN MAINTOSH	
STREET ADDRESS	12212 153RD ST N	
CITY-ST-ZIP	JUPITER, FL 33478	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Pamela Hubbard

1-6-03

561 964 4003

Date

Daytime Phone #

CR2E037 (10/02)