

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000001428

FILED  
Apr 18, 2009  
Secretary of State

Entity Name: AFA GOLD COAST CHAPTER 351, INC.

**Current Principal Place of Business:**

PO BOX 5846  
FT LAUDERDALE, FL 333105846

**New Principal Place of Business:**

10800 S.W. 57TH PLACE  
DAVIE, FL 33328

**Current Mailing Address:**

10800 S.W. 57TH PLACE  
FT LAUDERDALE, FL 33328

**New Mailing Address:**

FEI Number: 51-0236807      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

ROBERTS, JOSEPH H DR  
10800 S.W. 57TH PLACE  
FT LAUDERDALE, FL 330328      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: EV      ( ) Delete  
Name: MERIAM, RAN  
Address: 3690 N.W. 102 AVENUE  
City-St-Zip: CORAL SPRINGS, FL 33065

Title: P      ( ) Delete  
Name: BENNETT, HARVEY D  
Address: 11441 OHANO CIR  
City-St-Zip: BOYNTON BEACH, FL 33437

Title: S      ( ) Delete  
Name: MONTAVAO, VIRGINIA  
Address: 4475 NW 167TH TERR  
City-St-Zip: FORT LAUDERDALE, FL 33309

Title: T      ( ) Delete  
Name: ROBERTS, JOSEPH DR  
Address: 10800 SW 57 PLACE  
City-St-Zip: FORT LAUDERDALE, FL 33328

**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:

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: JOSEPH ROBERTS

T

04/18/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date