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NONPROFIT CORPORATION ANNUAL REPORT

1997

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SIGNATURE:



FLORIDA DEPARTMENT OF STATE

FILED

Feb 28 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **N38684**

(9)

GOLD COAST CHRISTIAN SCHOOL, INC.

Principal Place of Business Mailing Address 2800 W PROSPECT ROAD 2800 W PROSPECT ROAD FT LAUDERDALE FL 33309 FT LAUDERDALE FL 33309-2510 3. Date incorporated or Qualified 3a. Date of Last Report 06/19/1990 04/24/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0403630 21 28 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation has fiability for intangible tax under s. 199.032, 24 25 29 30 Florida Statutes Yes No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name FERDINAND, JON JAY, ESQUIRE Street Address (P.O. Box Number is Not Acceptable) 5310 N.W. 33RD AVE., SUITE 100 FT LAUDERDALE FL 33309 83 84 City Zip Code 85 11. Pursuant to the provisions of Sections 617 0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6) DELETE TITLE PD 1.1 TITLE Change Addition NAME WILLIAMSON, JERRY 12 NAME 2800 W PROSPECT ROAD STREET ADDRESS 1.3 STREET ADDRESS FT. LAUDERDALE FL CITY-ST-ZiP 1.4 CITY-ST-ZIP DELETE TITLE 21 TITLE ☐ Change Addition CARLSON, ALICE NAME 22 NAME 1639 NE 27 DRIVE STREET ADDRESS 23 STREET ADDRESS WILTON MANORS FL CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE TITLE 3.1 TITLE Addition Change NAME ROSENDAHL, DAVID 3.2 NAME 4556 NW 16 TERR STREET ADDRESS 3.3 STREET ADDRESS FT LAUDERDALE FL CITY-ST-ZIP 3.4. CITY - ST - ZIP TITLE DELETE 4.1 TITLE Change Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE 5.1 TITLE Channe Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-2IP 5.4 CITY - ST - ZIP TITLE DELETE 6.1 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS **6.3 STREET ADDRESS** 6.4 CITY-ST-ZIP CITY-ST-ZIP 14. I do 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 annual report or supplemental annual 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