

FILE NOW: FILING FEE IS \$61.25

FILED

May 20 1998 8:00am
Secretary of State

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| NONPROFIT CORPORATION ANNUAL REPORT 1998 |  | FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS |
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DOCUMENT # **770978** (5)

1. Corporation Name

GOLD COAST DRESSAGE ASSOC., INC.



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| Principal Place of Business 8100 ROYAL PALM BLVD. #105 CORAL SPRINGS FL 33065 US | Mailing Address 8100 ROYAL PALM BLVD. #105 CORAL SPRINGS FL 33065 US |
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| 3. Date Incorporated or Qualified 10/28/1983 |
| 4. FEI Number 65-0122084 |
| Applied For <input type="checkbox"/> Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required |
| 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees |
| 7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No |

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| 2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country | 2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country |
|---|--|

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**POLLAK, INGRED
8100 ROYAL PALM BLVD. #105
CORAL SPRINGS FL 33065**

| |
|---|
| 81 Name |
| 82 Street Address (P.O. Box Number is Not Acceptable) |
| 83 |
| 84 City FL 85 Zip Code |

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)

DATE

| 12. OFFICERS AND DIRECTORS | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
|----------------------------|--|--|--|
| TITLE PD | O'SULLIVAN, EVELYN <input checked="" type="checkbox"/> DELETE | 1.1 TITLE D - President <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition | |
| NAME | | 1.2 NAME INGRED POLLAK | |
| STREET ADDRESS | 100 SW 7TH TERR. | 1.3 STREET ADDRESS 8100 Royal Palm Blvd #105 | |
| CITY-ST-ZIP | BOCA RATON F 33486 | 1.4 CITY-ST-ZIP Coral Springs FL 33065 | |
| TITLE V | ENGLERTH, SUE ANNE <input checked="" type="checkbox"/> DELETE | 2.1 TITLE D - VP <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition | |
| NAME | | 2.2 NAME NOREEN O'Sullivan | |
| STREET ADDRESS | 1805 STONE HAVEN DR | 2.3 STREET ADDRESS 13432 NW 6th Drive | |
| CITY-ST-ZIP | BOYNTON BEACH FL 33436 | 2.4 CITY-ST-ZIP Plantation FL 33325 | |
| TITLE S | JACKSON, JOANNE <input checked="" type="checkbox"/> DELETE | 3.1 TITLE D - VP <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition | |
| NAME | | 3.2 NAME Andrea Hilling | |
| STREET ADDRESS | 401 SW 2ND STREET | 3.3 STREET ADDRESS 1528 Nancette Court | |
| CITY-ST-ZIP | BOCA RATON FL 33432 | 3.4 CITY-ST-ZIP Lake Worth FL 33461 | |
| TITLE T | RECH, NANCY <input checked="" type="checkbox"/> DELETE | 4.1 TITLE S - VP <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition | |
| NAME | | 4.2 NAME Marcy Strong | |
| STREET ADDRESS | 333 W. HEMINGWAY CIR. | 4.3 STREET ADDRESS 8730 Town Lake Drive | |
| CITY-ST-ZIP | MARGATE FL 33063 | 4.4 CITY-ST-ZIP Boca Raton, FL 33486 | |
| TITLE P | POLLAK, INGRED <input checked="" type="checkbox"/> DELETE | 5.1 TITLE T - VP <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition | |
| NAME | | 5.2 NAME Suzie Cook | |
| STREET ADDRESS | 8100 ROYAL PALM BLVD. #105 | 5.3 STREET ADDRESS 23313 Water Circle Dr. | |
| CITY-ST-ZIP | CORAL SPRINGS FL 33065 | 5.4 CITY-ST-ZIP Boca Raton FL 33486 | |
| TITLE D | BOLAND, BRIDGETTE <input checked="" type="checkbox"/> DELETE | 6.1 TITLE D - VP <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition | |
| NAME | | 6.2 NAME Linda Brink | |
| STREET ADDRESS | 1462 GARDEN ROADCE | 6.3 STREET ADDRESS 13910 E Palomino Dr | |
| CITY-ST-ZIP | FT. LAUDERDALE FL 33326 | 6.4 CITY-ST-ZIP Ft. Lauderdale FL 33330 | |

14. 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 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 appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE *[Signature]* **926 479-8877**

CR2E037 (10/97)