

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 770978

**Entity Name:** GOLD COAST DRESSAGE ASSOC., INC.

**Current Principal Place of Business:**

14457 DRAFT HORSE LN  
WELLINGTON, FL 33414

**Current Mailing Address:**

14457 DRAFT HORSE LN  
WELLINGTON, FL 33414 US

**FEI Number:** 65-0122084

**Certificate of Status Desired:** No

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

OSULLIVAN, NOREEN  
14457 DRAFT HORSE LN  
WELLINGTON, FL 33414 US

*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

**Officer/Director Detail :**

Title            PRESIDENT  
Name            O'SULLIVAN, NOREEN  
Address        14457 DRAFT HORSE LANE  
City-State-Zip: WEST PALM BEACH FL 33414

Title            TREASURER  
Name            PAOLUCCI, SHARON  
Address        117 PRESERVE DRIVE  
City-State-Zip: ROYAL PALM BEACH FL 33411

Title            DIRECTOR  
Name            FLANAGAN, JOHN  
Address        14457 DRAFT HORSE LANE  
City-State-Zip: WELLINGTON FL 33414

Title            VP  
Name            KIMBALL DAVIS, LYNNE  
Address        10644 LAKE SHORE DRIVE  
City-State-Zip: WELLINGTON FL 33414

Title            SECRETARY  
Name            SWERDLIN, AMY BRADLEY  
Address        14457 DRAFT HORSE LN  
City-State-Zip: WELLINGTON FL 33414

*I hereby 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 all other like empowered.*

**SIGNATURE:** NOREEN O' SULLIVAN

**PRESIDENT**

**03/23/2017**

Electronic Signature of Signing Officer/Director Detail

Date