

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 546732

1. Entity Name

GOLD COAST TITLE COMPANY - WEST

FILED
Feb 26, 2000 8:00 am
Secretary of State

02-26-2000 90010 039 ***150.00

Principal Place of Business

75 S.E. 3RD STREET
BOCA RATON FL 33432

Mailing Address

75 S.E. 3RD STREET
BOCA RATON FL 33432-7168

2. Principal Place of Business

1001 S.W. 2ND AVENUE

Suite, Apt. #, etc.

SUITE 8

3. Mailing Address

1001 S.W. 2ND AVENUE

Suite, Apt. #, etc.

SUITE 8

City & State

BOCA RATON, FL 33432-7168

Zip

33432-7168

Country

U.S.A.

City & State

BOCA RATON, FL

Zip

33432-7168

Country

U.S.A.

4. FEI Number

59-1773910

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

DANCE, J. HERMAN
75 S.E. 3RD ST
BOCA RATON FL 33432

7. Name and Address of New Registered Agent

Name
SAME

Street Address (P.O. Box Number is Not Acceptable)
1001 S.W. 2ND AVENUE

SUITE 8

City

BOCA RATON,

FL

Zip Code
33432-7168

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

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD DANCE, J HERMAN 5530 GLADES RD BOCA RATON, FL 00000	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DANCE, ESTHER B 5530 GLADES RD BOCA RATON, FL 00000	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

J. Herman Dance

PRESIDENT/DIRECTOR

2/17/00

Date

(561) 395-0740

Daytime Phone #

CR2E034 (9/99)