

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Jan 26, 1999 8:00am
Secretary of State

01-26-1999 90034 005 *****61.25

DOCUMENT # 728032

i. Corporation Name

GOLD COAST TOWERS - A CONDOMINIUM, INC.

Principal Place of Business

ONE SOUTH LAKESIDE DRIVE
LAKE WORTH FL 33460

Mailing Address

ONE SOUTH LAKESIDE DRIVE
LAKE WORTH FL 33460



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
i		26		11/08/1973	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	
27		27		59-1509634	
City & State		City & State		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
28		28		6. Election Campaign Financing <input type="checkbox"/> \$5.00 May Be Added to Fees	
Zip		Country		Trust Fund Contribution <input type="checkbox"/>	
25		29		30	

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
YOUNG, DOROTHY K.		81 Name	
1 SOUTH LAKESIDE DR.		82 Street Address (P.O. Box Number is Not Acceptable)	
APT. A-3		83	
LAKE WORTH FL 33460		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 Dorothy K. Young Treasurer 1-6-99
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 <input type="checkbox"/> DELETE		1.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME BUTLER, RUSSELL E		1.2 NAME	
STREET ADDRESS 1 SO LAKESIDE DRIVE B3		1.3 STREET ADDRESS	
CITY-ST-ZIP LAKE WORTH FL 33460		1.4 CITY-ST-ZIP	
TITLE <input type="checkbox"/> DELETE		2.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME BRANDT, ELMA		2.2 NAME	
STREET ADDRESS 1 S. LAKESIDE DRIVE, E-4		2.3 STREET ADDRESS	
CITY-ST-ZIP LAKE WORTH FL		2.4 CITY-ST-ZIP	
TITLE <input type="checkbox"/> DELETE		3.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME WAGON, ERIS		3.2 NAME	
STREET ADDRESS 1 S. LAKESIDE DRIVE, D-6		3.3 STREET ADDRESS	
CITY-ST-ZIP LAKE WORTH FL		3.4 CITY-ST-ZIP	
TITLE <input type="checkbox"/> DELETE		4.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME YOUNG, DOROTHY		4.2 NAME	
STREET ADDRESS 1 S. LAKESIDE DRIVE, A-3		4.3 STREET ADDRESS	
CITY-ST-ZIP LAKE WORTH FL		4.4 CITY-ST-ZIP	
TITLE <input type="checkbox"/> DELETE		5.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE <input type="checkbox"/> DELETE		6.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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, with all other like empowered.

SIGNATURE: Dorothy K. Young SIGNATURE REQUIRED 1-6-99 588-2768
Signature and typed or printed name of signing officer or director Date Daytime Phone #

CR2E037 (11/98)