

2000 UNIFORM BUSINESS REPORT (UBR)

2/2

DOCUMENT # 728032

1. Entity Name

GOLD COAST TOWERS - A CONDOMINIUM, INC.

FILED
Apr 27, 2000 8:00 am
Secretary of State

02-29-2000 90129 044 ****61.25

Principal Place of Business
ONE SOUTH LAKESIDE DRIVE
LAKE WORTH FL 33460

Mailing Address
ONE SOUTH LAKESIDE DRIVE
LAKE WORTH FL 33460-3928

2. Principal Place of Business
Suite, Apt. #, etc.
City & State
Zip Country

3. Mailing Address
Suite, Apt. #, etc.
City & State
Zip Country



DO NOT WRITE IN THIS SPACE

4. FEI Number **59-1509634**
Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
YOUNG, DOROTHY K.
1 SOUTH LAKESIDE DR.
APT. A-3
LAKE WORTH FL 33460

7. Name and Address of New Registered Agent
Name Mariette Leclair
Street Address (P.O. Box Number is Not Acceptable)
17 S. Lakeside Dr. #2
Lake Worth
City FL Zip Code 33460

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 Mariette Leclair Mariette Leclair, Treasury 2/4/00
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
PD	BUTLER, RUSSELL E	1 SO LAKESIDE DRIVE B3	LAKE WORTH FL 33460	<input type="checkbox"/>
DV	BRANDT, ELMA	1 S. LAKESIDE DRIVE, E-4	LAKE WORTH FL	<input type="checkbox"/>
DS	WAGNON, ERIS	1 S. LAKESIDE DRIVE, D-6	LAKE WORTH FL	<input type="checkbox"/>
DT	YOUNG, DOROTHY	1 S. LAKESIDE DRIVE, A-3	LAKE WORTH FL	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
President	Hunt, Ken	1 S. Lakeside Dr C6	Lake Worth, FL 33460	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Vice President	Wooding, Harold	1 S. Lakeside Dr, B6	Lake Worth, FL 33460	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Secretary	Daniels, Mary-Ann	17 S Lakeside, #1	Lake Worth, FL 33460	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Treasurer	Leclair, Mariette	17 S Lakeside, #2	Lake Worth FL 33460	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

12. 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE Mariette Leclair Mariette Leclair Treasurer 2/4/00 561-582-0616
Signature and typed or printed name of signing officer or director Date Daytime Phone #

CP2E037 (9/99)