

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 734909

FILED  
Jan 29, 2008  
Secretary of State

**Entity Name:** GOLD COAST WATERCOLOR SOCIETY, INC.

**Current Principal Place of Business:**

1350 EAST SUNRISE BOULEVARD  
SUITE 113  
FORT LAUDERDALE, FL 33304 US

**New Principal Place of Business:**

**Current Mailing Address:**

1350 EAST SUNRISE BOULEVARD  
SUITE 113  
FORT LAUDERDALE, FL 33304 US

**New Mailing Address:**

**FEI Number:** **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired (X)**

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

WATKINSON, MARY D MS  
1217 TANGELO ISLE  
FORT LAUDERDALE, FL 33315 US

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

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

**OFFICERS AND DIRECTORS:**

Title: DIR ( ) Delete  
Name: OLSON, DOROTHY MS  
Address: 630 TENNIS CLUB DRIVE #104  
City-St-Zip: FT LAUDERDALE, FL 33311

Title: TREA ( ) Delete  
Name: WATKINSON, MARY D MS  
Address: 1217 TANGELO ISLE  
City-St-Zip: FORT LAUDERDALE, FL 33315 US

Title: SEC ( ) Delete  
Name: COLLIN BUTCH, JANE  
Address: 116 S W 127 AV  
City-St-Zip: PLANTATION, FL 33325

Title: VP ( ) Delete  
Name: HENRIETTE, ARNOLD L  
Address: 101 SE 3RD AVE #504  
City-St-Zip: DANIA BEACH, FL 33004

Title: PRES ( ) Delete  
Name: WOLFORD, F COLE  
Address: 2890 N E 35 TH STREET  
City-St-Zip: FORT LAUDERDALE, FL 33306

Title: VP ( ) Delete  
Name: HERKERT, NANCY MS  
Address: 5010 SW 164 TERRACE  
City-St-Zip: SW RANCHES, FL 33331 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: F COLE WOLFORD

PRES

01/29/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date