

**NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Feb 06, 2002 8:00 am
Secretary of State

02-06-2002 90035 013 ****70.00

DOCUMENT #740664 ✓

1. Entity Name

Florida Gold Coast Association of the
Amateur Athletic Union of the United States Inc

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

15820 NW 37th Avenue

Suite, Apt. #, etc.

3. Mailing Address

15820 NW 37th Avenue

Suite, Apt. #, etc.

City & State

Opa Locka, Florida

City & State

Opa Locka, Florida

4. FEI Number

56-6151161

Applied For

Not Applicable

Zip

33054

Country

USA

Zip

33054

Country

USA

5. Certificate of Status Desired ☒

**\$8.75 Additional
Fee Required**

7. Name and Address of Current Registered Agent

Name

Robin Brown-Beamon

Street Address (P.O. Box Number is Not Acceptable)

15820 NW 37th Avenue

City

Opa Locka,

FL

Zip Code

33054

**DO NOT WRITE
IN THIS SPACE**

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

Robin Brown-Beamon Robin Brown-Beamon

12-28-01

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FEE IS \$61.25

Initial or Amended UBR

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	President
NAME	Gary Mckinon D
STREET ADDRESS	1508 MLK Blvd
CITY-ST-ZIP	Riviera Beach, FL 33404
TITLE	Secretary D
NAME	Stan Saunders
STREET ADDRESS	1324 13th Terrace
CITY-ST-ZIP	Palm Beach Garden, FL 33418
TITLE	Treasurer D
NAME	Robin Brown-Beamon
STREET ADDRESS	15820 NW 37th Avenue
CITY-ST-ZIP	Opa Locka, Florida 33054
TITLE	
NAME	
STREET ADDRESS	
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**DO NOT WRITE
IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

Robin Brown-Beamon Robin Brown-Beamon

12-28-01