

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 754698

FILED
Feb 08, 2009
Secretary of State

Entity Name: FLORIDA GOLD COAST SWIMMING, INC.

Current Principal Place of Business:

951 U.S. HWY # 1
NORTH PALM BEACH, FL 33408

New Principal Place of Business:

Current Mailing Address:

951 U.S. HWY # 1
NORTH PALM BEACH, FL 33408

New Mailing Address:

FEI Number: 31-1012803

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ANDREWS, JOHN S ESQ
ANDREWS PHILLIPS & GALATIS
1501 NE 4 AVE
FT. LAUDERDALE, FL 33304 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: VPD () Delete
Name: PEPPAS, KIRK
Address: 13378 SW 144TH TERR
City-St-Zip: MIAMI, FL 33186 US

Title: VPD () Delete
Name: AGUIRRE, ALFONSO
Address: 951 US HWY. #1
City-St-Zip: NORTH PALM BEACH, FL 33408 US

Title: VPD () Delete
Name: CAVANAH, RICHARD
Address: 951 US HWY # 1
City-St-Zip: N PALM BEACH, FL 33408 US

Title: PD () Delete
Name: ROBERT, CAROGOL
Address: 466 SOUTH FIG TREE LN
City-St-Zip: PLANTATION, FL 33317 US

Title: SD () Delete
Name: BOSCO, LORI
Address: 5901 COLLEGE ROAD
City-St-Zip: KEY WEST, FL 33040 US

Title: () Delete
Name:
Address:
City-St-Zip:

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: PD (X) Change () Addition
Name: ANDERSON, CHRISTOPHER
Address: 2286 NW 208TH TERR
City-St-Zip: PEMBROKE PINES, FL 33029 US

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

Title: VPD () Change (X) Addition
Name: WILLIAMS, ALLAN
Address: 642 SE 19TH AVE., APT.#1
City-St-Zip: DEARFIELD BEACH, FL 33441

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: RICHARD E. CAVANAH

VPD

02/08/2009

Electronic Signature of Signing Officer or Director

Date