

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 764379

FILED
Apr 20, 2008
Secretary of State

Entity Name: GOLD COAST ARABIAN HORSE CLUB, INC.

Current Principal Place of Business:

12296 159TH CT N
JUPITER, FL 33478

New Principal Place of Business:

Current Mailing Address:

12296 159TH CT. N.
JUPITER, FL 33478

New Mailing Address:

FEI Number: 65-0764379

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BRANN, NANCY
12296 159TH CT. N.
JUPITER, FL 33478 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: PD () Delete
Name: JOHN, CLAUDIA
Address: 17120 JUPITER FARMS RD
City-St-Zip: JUPITER, FL 33478

Title: VD () Delete
Name: WALTER, CAROL
Address: 16301 127TH DR NORTH
City-St-Zip: JUPITER, FL 33478

Title: SD () Delete
Name: NALTY, MICHELLE
Address: 3092 FLORIDA BLVD
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: TD () Delete
Name: BRANN, NANCY
Address: 12296 159TH CT N
City-St-Zip: JUPITER, FL 33478

Title: MSD () Delete
Name: MCDAVID, DANA
Address: 12356 158TH CT NORTH
City-St-Zip: JUPITER, FL 33478

Title: D () Delete
Name: DICK, DOROTHY
Address: 4906 WIGGENS ROAD
City-St-Zip: LAKE WORTH, FL 33463

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: WALTER, CAROL
Address: 16301 127TH DR NORTH
City-St-Zip: JUPITER, FL 33478

Title: VD (X) Change () Addition
Name: BRANN, NANCY
Address: 12296 159TH CT N
City-St-Zip: JUPITER, FL 33478

Title: SD (X) Change () Addition
Name: JOHN, CLAUDIA
Address: 12147 170TH RD NORTH
City-St-Zip: JUPITER, FL 33478

Title: TD (X) Change () Addition
Name: GATYAS, JULIE
Address: 12044 COLONY AVE
City-St-Zip: PALM BEACH GARDENS, FL 33478

Title: MSD (X) Change () Addition
Name: LUNA, MARY ANN
Address: 16701 W GOLDCUP DR
City-St-Zip: LOXAHATCHEE, FL 334701

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: NANCY BRANN

VP

04/20/2008

Electronic Signature of Signing Officer or Director

Date