

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 851408

FILED
Apr 21, 2004
Secretary of State

Entity Name: GOLD COAST PUBLICATIONS, INC.

Current Principal Place of Business:

200 EAST LAS OLAS BLVD
FORT LAUDERDALE, FL 333012248

New Principal Place of Business:

Current Mailing Address:

435 NORTH MICHIGAN AVE
600
CHICAGO, IL 60611 US

New Mailing Address:

FEI Number: 59-2145505 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE CO.
1201 HAYS ST.
TALLAHASSEE, FL 32301 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: SV () Delete
Name: KENNEY, CRANE H
Address: 435 N MICHIGAN AVE #600
City-St-Zip: CHICAGO, IL 60611

Title: P () Delete
Name: MCKEON, JOHN C
Address: 200 EAST LAS OLAS BLVD
City-St-Zip: FT. LAUDERDALE, FL 33301

Title: V () Delete
Name: LABONIA, MICHAEL
Address: 200 EAST LAD OLAS BLVD
City-St-Zip: FT. LAUDERDALE, FL 33301

Title: D () Delete
Name: FULLER, JACK
Address: 435 N. MICHIGAN AVENUE
City-St-Zip: CHICAGO, IL 60611

Title: D () Delete
Name: GREMILLION, ROBERT
Address: 200 EAST LAS OLAS BLVD
City-St-Zip: FORT LAUDERDALE, FL 33301

Title: AS () Delete
Name: HIANIK, MARK W
Address: 435 N MICHIGAN AVE
City-St-Zip: CHICAGO, IL 60611

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: SD (X) Change () Addition
Name: KENNEY, CRANE H
Address: 435 N MICHIGAN AVE #600
City-St-Zip: CHICAGO, IL 60611

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

Title: VP (X) Change () Addition
Name: LABONIA, MICHAEL
Address: 200 EAST LAD OLAS BLVD
City-St-Zip: FT. LAUDERDALE, FL 33301

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 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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CRANE H. KENNEY

SECR

04/21/2004

Electronic Signature of Signing Officer or Director

_____ Date