## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

(6)

**DOCUMENT #** 

**GOLD COAST CHARTERS, INC.** 

Principal Place of Business	Mailing Address	
255 EAST 22ND COURT RIVIERA BEACH FL 33404-4505	255 EAST 22ND COURT RIVIERA BEACH FL 33404-4505	

						1					
							3.	Date Incorporated or Qualified 09/07/1984	3a. Date	of Las 5/01/	
Principal Place of Business     2a, Mailing Address							4.	FEI Number			Applied For
26							59-2453576			r	Not Applicable
Suite, A	Apt. #, etc.	27	City & State				5. Certificate of Status Desired S8.75 Addit Fee Require				
Crty & 5	State	28						Election Campaign Financing Trust Fund Contribution			\$5.00 May Be Added to Fees
Zip 24	Country 25	29 29	(ip	Gountry 30			8. This corporation has liability for intangible tax under s 199.032.  Florida Statutes ☐ Yes ☐ No				
9. Name and Address of Current Registered Agent						10. Name and Address of New Registered Agent					
					81	Name					
ELSHER, JOHN J., JR. 255 EAST 22ND COURT RIVIERA BEACH FL 33404			82	Street Addre	t Address (P.O. Box Number is Not Acceptable)						
					83						
					84	City			FL	85	Zip Code
or reg	iant to the provisions of Sections 607.0 gistered agent, or both, in the State of F ar with, and accept the obligations of, S	lorida. Such d	hange was authorize						rpose of cha		
SIGNATUR	RE										

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE Change Addition TITLE 1 1 TITLE ELSNER, JOHN J., JR. 1.2 NAME NAME 135 EAST 24TH ST STREET ADDRESS 1.3 STREET ADDRESS RIMERA BEACH FL CITY-ST-ZIP 14 CITY ST-ZIP DELETE Change Addition TITLE 2 1 THE WALKER, WILLIAM B NAME 2.2 NAME 5120 ELM HURST RD. #G STREET ADDRESS 2.3 STREET ADDRESS WEST PALM BEACH FL CITY - SY - ZIP 2 4 CITY - ST - ZIP TIFLE DELETE 3 1 TIT.E Change ☐ Addition 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS CHY-ST-ZIP 3 4 CITY - ST-ZIP DELETE Change Addition TITLE 4 1 TITLE NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST. ZIP Change DELETE Addition TITLE 5 1 TIFLE 5.2 NAME STREET ADDRESS 5.3 STHEET ADDRESS 5 4 CITY - <u>\$1 - ZIP</u> CITY-S1-ZIP DELETE Change Add-tion TITLE 6 LITHE STREET ADDRESS 6.3 STREET AUDRESS 6.4 CiTY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes. I further certify that the information indicated on this armual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under cath, 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 in Block 12 or Block 13 if changed, or on an attachment with an address

SIGNATURE:

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CR2E034 (12/95)