

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000032724

**FILED**  
**Apr 30, 2012**  
**Secretary of State**

**Entity Name:** GOLD COAST CIGAR CLUB, LLC

**Current Principal Place of Business:**

590 SW 9TH TERRACE  
SUITE 3  
POMPANO BEACH, FL 33069

**New Principal Place of Business:**

**Current Mailing Address:**

590 SW 9TH TERRACE  
SUITE 3  
POMPANO BEACH, FL 33069

**New Mailing Address:**

**FEI Number:** 27-2202741

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

OWEN, DONALD  
199 SW 15TH COURT  
BOCA RATON, FL 33486 US

**Name and Address of New Registered Agent:**

OWEN, DONALD  
455 NE 5TH AVE D-377  
DELRAY BEACH, FL 33483 US

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:** DONALD OWEN

04/30/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM  
**Name:** OWEN, DONALD  
**Address:** 455 NE 5TH AVE  
**City-St-Zip:** DELRAY BEACH, FL 33483

**Title:** MGR  
**Name:** DORN, WILLIAM  
**Address:** 590 SW 9TH TERRACE, ST 3  
**City-St-Zip:** POMPANO BEACH, FL 33069

**Title:** MGR  
**Name:** OWEN, DANIEL  
**Address:** 455 NE 5TH AVE D-377  
**City-St-Zip:** DELRAY BEACH, FL 33483

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

**SIGNATURE:** DONALD OWEN

MGRM

04/30/2012

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date