

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000000322

FILED  
Apr 19, 2009  
Secretary of State

**Entity Name:** THE FINANCIAL PLANNING ASSOCIATION OF THE GOLD COAST, INC.

**Current Principal Place of Business:**

12157 LINEBAUGH AVENUE  
312  
TAMPA, FL 336261732

**New Principal Place of Business:**

**Current Mailing Address:**

12157 LINEBAUGH AVENUE  
312  
TAMPA, FL 336261732

**New Mailing Address:**

**FEI Number:** 65-0977003      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

LESLIE, MCCULLOUGH  
800 S FEDERAL HIGHWAY  
BOCA RATON, FL 33432      US

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

KELBEN, HOLBROOK  
1630 NORTH O STREET  
LAKE WORTH, FL 33460      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: KELBEN HOLBROOK

04/19/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD      ( ) Delete  
Name: MCCULLOUGH, LESLIE CFP(R)  
Address: 800 S FEDERAL HIGHWAY  
City-St-Zip: BOCA RATON, FL 33432

Title: VPD      ( ) Delete  
Name: BENBOW, JUDY CFP(R)  
Address: COMERICA - 1800 CORPORATE BLVD NW 101  
City-St-Zip: BOCA RATON, FL 33431

Title: TD      ( ) Delete  
Name: RATHBUN, DEBORAH CFP(R)  
Address: 6486 NIKKI WAY  
City-St-Zip: LAKE WORTH, FL 33467

Title: D      ( ) Delete  
Name: HOSSAIN, RUBINA CFP(R)  
Address: PALM PLANNING - 5652 CORPORATE WAY  
City-St-Zip: WEST PALM BEACH, FL 33407

Title: D      ( ) Delete  
Name: RABINOWITZ, BARRY CFP(R)  
Address: 10930 NW 10TH COURT  
City-St-Zip: PLANTATION, FL 33322

Title: D      (X) Delete  
Name: SAVITZ, DAVID CFP(R)  
Address: 8025 ROSSINI WAY  
City-St-Zip: LAKE WORTH, FL 33467

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

Title: TD      (X) Change ( ) Addition  
Name: HOLBROOK, KELBEN CFP(R)  
Address: 1630 NORTH O STREET  
City-St-Zip: LAKE WORTH, FL 33460

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 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: KELBEN HOLBROOK

TD

04/19/2009

Electronic Signature of Signing Officer or Director

Date