

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000003204

FILED  
Feb 23, 2010  
Secretary of State

**Entity Name:** GOLD COAST ASSOCIATION OF CODE ENFORCEMENT, INC.

**Current Principal Place of Business:**

400 S FEDERAL HWY  
HALLANDALE BEACH, FL 33009 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 534  
HALLANDALE BEACH, FL 33008 US

**New Mailing Address:**

**FEI Number:** 65-1009521

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

UBER, PATRICIA  
9551 W SAMPLE RD  
CORAL SPRINGS, FL 33065 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  
**Name:** UBER, PATRICIA  
**Address:** 9551 W SAMPLE RD  
**City-St-Zip:** CORAL SPRINGS, FL 33065

**Title:** VD  
**Name:** CAGNINA, VAUDEEN  
**Address:** 4800 W COPANS RD  
**City-St-Zip:** COCONUT CREEK, FL 33063

**Title:** TD  
**Name:** SARROS, SHELLEY  
**Address:** 400 S FEDERAL HWY  
**City-St-Zip:** HALLANDALE BEACH, FL 33009

**Title:** S  
**Name:** SIBNER, KIMBERELY  
**Address:** 1607 NW 136 AVE, BLDG B  
**City-St-Zip:** SUNRISE, FL 33323

I hereby 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 all other like empowered.

**SIGNATURE:** SHELLEY SARROS

TD

02/23/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date