

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000000338

FILED
Apr 08, 2008
Secretary of State

Entity Name: GOLD COAST INTERGROUP, INC.

Current Principal Place of Business:

12565 IMPERIAL ISLES DR
#401
BOYNTON BEACH, FL 33437 US

New Principal Place of Business:

1357 N.W. 112 WAY
CORAL SPRINGS, FL 33071 US

Current Mailing Address:

P.O. BOX 936032
MARGATE, FL 330936032

New Mailing Address:

FEI Number: 65-1069045 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
343 ALMERIA AVENUE
CORAL GABLES, FL 33134 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 () Delete
Name: HACKER, HARRIET
Address: 12565 IMPERIAL ISLES DR #401
City-St-Zip: BOYNTON BEACH, FL 33437

Title: TD () Delete
Name: STANNIS, RITA
Address: 8027 BELLARQET WY
City-St-Zip: BOYNTON BEACH, FL 33437

Title: SVD () Delete
Name: HEYMAN, ANNE
Address: 5766 DORIS CT
City-St-Zip: DELRAY BEACH, FL 33484

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: OYEDA, LEIGH
Address: 9311 ORANGE GROVE DRIVE APT.306
City-St-Zip: DAVIE, FL 33324

Title: VPD (X) Change () Addition
Name: NEWMAN, ROSLYN
Address: 12850 ST. RD. 84 BOX 8-26
City-St-Zip: DAVIE, FL 33325

Title: TR (X) Change () Addition
Name: SHERMAN, ANDREA
Address: 1357 N.W. 112 WAY
City-St-Zip: CORAL SPRINGS, FL 33071

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: ANDREA SHERMAN

TR

04/08/2008

Electronic Signature of Signing Officer or Director

Date