

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000001428

FILED
Apr 18, 2009
Secretary of State

Entity Name: AFA GOLD COAST CHAPTER 351, INC.

Current Principal Place of Business:

PO BOX 5846
FT LAUDERDALE, FL 333105846

New Principal Place of Business:

10800 S.W. 57TH PLACE
DAVIE, FL 33328

Current Mailing Address:

10800 S.W. 57TH PLACE
FT LAUDERDALE, FL 33328

New Mailing Address:

FEI Number: 51-0236807

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROBERTS, JOSEPH H DR
10800 S.W. 57TH PLACE
FT LAUDERDALE, FL 330328 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: EV () Delete
Name: MERIAM, RAN
Address: 3690 N.W. 102 AVENUE
City-St-Zip: CORAL SPRINGS, FL 33065

Title: P () Delete
Name: BENNETT, HARVEY D
Address: 11441 OHANO CIR
City-St-Zip: BOYNTON BEACH, FL 33437

Title: S () Delete
Name: MONTAVAO, VIRGINIA
Address: 4475 NW 167TH TERR
City-St-Zip: FORT LAUDERDALE, FL 33309

Title: T () Delete
Name: ROBERTS, JOSEPH DR
Address: 10800 SW 57 PLACE
City-St-Zip: FORT LAUDERDALE, FL 33328

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: JOSEPH ROBERTS

T

04/18/2009

Electronic Signature of Signing Officer or Director

Date