

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000005875

FILED
Sep 11, 2007
Secretary of State

Entity Name: UNITY GOLD COAST MINISTRIES, INC.

Current Principal Place of Business:

411 NE 21ST
MIAMI, FL 33137

New Principal Place of Business:

Current Mailing Address:

411 NE 21ST
MIAMI, FL 33137

New Mailing Address:

FEI Number: 20-4003634 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

DOMBEK, MARY KATHERINE REV
2892 SE ITALY ST
PORT ST. LUCIE, FL 34952 US

Name and Address of New Registered Agent:

REITER, ROBIN REV
950 43RD AVENUE
VERO BEACH, FL 32960 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: ROBIN REITER

09/11/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: DOMBEK, MARY KATHERINE
Address: 2892 SE ITALY STREET
City-St-Zip: PORT ST. LUCIE, FL 34952

Title: DS () Delete
Name: CARY, JANICE
Address: 360 SW COCONUT KEY WAY
City-St-Zip: PORT ST. LUCIE, FL 34986

Title: DT () Delete
Name: LOPEZ, GLORIAMARIA
Address: 4048 TIMBER COVE LANE
City-St-Zip: WESTON, FL 33332

Title: DVP () Delete
Name: EPPS, KAREN
Address: 657 NE 6TH STREET
City-St-Zip: MIAMI, FL 33138

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: REITER, ROBIN REV
Address: 950 43RD AVENUE
City-St-Zip: VERO BEACH, FL 32960

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

Title: DT (X) Change () Addition
Name: LOPEZ, GLORIAMARIA
Address: 90 ALTON RD # 209
City-St-Zip: MIAMI BEACH, FL 33139

Title: DVP (X) Change () Addition
Name: JACKSON, CHRIS
Address: 161 NE 110TH ST
City-St-Zip: NORTH MIAMI, FL 33161

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: ROBIN REITER

DP

09/11/2007

Electronic Signature of Signing Officer or Director

Date