

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**May 08, 2006 8:00 am**  
**Secretary of State**

05-08-2006 90279 040 \*\*\*\*61.25

**DOCUMENT # N06431**

1. Entity Name

**GOLD COAST TREASURY MANAGEMENT ASSOCIATION, INC.**



Principal Place of Business

% COMERICA  
2800 WESTON RD, SUITE 200 LIANA SANCH  
WESTON FL 33331

Mailing Address

% COMERICA  
2800 WESTON RD, SUITE 200 LIANA SANCH  
WESTON FL 33331

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/05)

4. FEI Number

59-2666754

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

SANCHEZ, LIANA  
C/O COMERICA BANK  
2800 WEST ROAD, SUITE 200  
WESTON FL 33331

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and, if applicable

(NOTE: Registered Agent signature required when reissuing)

DATE

4/28/06.

**FILE NOW: FEE IS \$61.25**  
**Due By May 1, 2006**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make Check Payable to**  
**Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete  
NAME GARCIA, VIVIAN  
STREET ADDRESS 7900 GLADES RD - P O BOX 100  
CITY-ST-ZIP BOCA RATON FL 33429

TITLE VD ☐ Delete  
NAME MILLER, TINA  
STREET ADDRESS 501 SOUTH FLAGLER DR  
CITY-ST-ZIP WEST PALM BEACH FL 33401

TITLE SD ☐ Delete  
NAME GENDAL, LISA  
STREET ADDRESS ONE FINANCIAL PLAZA/ FL6-808-10-04  
CITY-ST-ZIP FT LAUDERDALE FL 33394

TITLE TD ☐ Delete  
NAME SANCHEZ, LIANA  
STREET ADDRESS 2800 WESTON ROAD, STE #200  
CITY-ST-ZIP WESTON FL 33331

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
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STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:**

4/28/06 (954) 306 4528