## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N07000007309

Entity Name: GOLD COAST PR COUNCIL, INC.

FILED Jan 25, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

C/O BETSY SILVERFINE C/O RICHARD POLLACK
269 PELICAN WAY 5143 CLEVELAND ROAD
DELRAY BEACH, FL 33483 DELRAY BEACH, FL 33484

Current Mailing Address: New Mailing Address:

C/O BETSY SILVERFINE C/O RICHARD POLLACK
269 PELICAN WAY 5143 CLEVELAND ROAD
DELRAY BEACH, FL 33483 DELRAY BEACH, FL 33484 US

FEI Number: 26-0581864 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

EPSTEIN, JEANNE R 7624 GREAT OAK DRIVE LAKE WORTH, FL 33467 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:

Electronic Signature of Registered Agent Date

## OFFICERS AND DIRECTORS:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 D () Delete
 Title:
 P (X) Change () Addition

 Name:
 EPSTEIN, JEANNE
 Name:
 EPSTEIN, JEANNE

 Address:
 7624 GREAT OAK DRIVE
 Address:
 7624 GREAT OAK DRIVE

Address: 7624 GREAT OAK DRIVE
City-St-Zip: LAKE WORTH, FL 33467

Address: 7624 GREAT OAK DRIVE
City-St-Zip: LAKE WORTH, FL 33467

Title: () Delete Title: (X) Change ( ) Addition SILVERFINE, BETSY Name: Name: POLLACK, RICHARD Address: 269 PELICAN WAY Address: 5143 CLEVELAND ROAD City-St-Zip: DELRAY BEACH, FL 33483 City-St-Zip: DELRAY BEACH, FL 33484

Title: D ( ) Delete Title: V (X) Change ( ) Addition

 Name:
 WINSTON, STEVE
 Name:
 SCHWEIKHART, GARY

 Address:
 269 PELICAN WAY
 Address:
 9735 TAVINER DR.

 City-St-Zip:
 DELRAY BEACH, FL 33483
 City-St-Zip:
 BOCA RATON, FL 33496

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: RICHARD S. POLLACK TRES 01/25/2009