## **FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## **DOCUMENT # N07716**

1. Corporation Name

GOLD COAST VENTURE CAPITAL CLUB, INC.

Principal Place of Business	
C/O JONATHAN E. COLE	
250 ROYAL PALM WAY. SUITE 30	C
DALLE DEACH EL 20400	

2. Principal Place of Business

Suite, Apt. #, etc.

21

Mailing Address

2a. Mailing Address

Suite, Apt. #, etc.

26

27

C/O JONATHAN E. COLE 250 ROYAL PALM WAY. SUITE 300 PALM BEACH FL 33480

## **FILED** May 05, 1999 8:00 am Secretary of State

05-05-1999 90173 050 \*\*\*\*61.25

*	4	4944	137 - 91	0173 -	50	,	-	



3. Date Incorporated or Qualifed

02/19/1985

59-2506073

4. FEI Number

22			27				59-2506073		Not	Applicable	
	City & State	8	City & State	City & State			5. Certificate of Status Desired		\$8.75 A		
23	Zip	Country	Zip	Zip Cou			6. Election Campaign Financing		\$5.00 N		
	Ζip		<del>                                     </del>	30	- ·		Trust Fund Contribution		Added to		
24		25   29   3 9. Name and Address of Current Registered Agent			<del></del>		10. Name and Address of New R	egistered Ag			
		a. Maine and Address of Current	Kedistelen Adelit		81	Name					
	COLE, JOI	nathan e.			82	Street A	ddress (P.O. Box Number is Not Accepta	ble)			
		L PALM WAY			83						
	SUITE 300				100						
	Palm Bea	NCH FL 33480			84	City		FL	85 Zip C	ode	
				- <del>-</del>	للبي		ation when the this statement for the	. –	anging its r	registered	
Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.  SIGNATURE    Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE											
12		OFFICERS AND		· · · · · · · · · · · · · · · · · · ·	13.		ADDITIONS/CHANGES TO OF	ICERS AND	DIRECTOR	RS IN 12	
TITE		D		ELETE	1.1 TITLE				Change	Addition	
NAI	J	DONNELLY, MIKE			1.2 NAME						
	EET ADDRESS	1			1.3 STREET ADDRESS						
	Y-ST-ZIP	POMPANO BCH. FL			1.4 CITY-ST-ZIP						
1111		DELETE			2.1 TITLE				Change	☐ Addition	
NAJ	WE	BATES, DAVID			2.2 NAME	1					
STE	REET ADDRESS	777 S. FLAGLER DR. #500E			2.3 STREET	ADDRESS					
СIT	Y-ST-ZIP	WEST PALM BEACH FL			2. 4 CITY-S	T-ZIP					
TITI		D	D	ELETE	3.1 TITLE				_] Change	☐ Addition	
NAI	ME	IGOE, JOHN G.			3.2 NAME	l					
STI	REET ADORESS	250 ROYAL PALM WAY			3.3 STREET	ADDRESS					
CIT	Y-ST-ZIP	PALM BEACH FL			3.4. CITY-S	T-ZIP					
TIT		T		ELETE	4.1 TITLE			[	Change	☐ Addition	
NAI	WE	WASSERMAN, ADAM			4. 2 NAME	}					
Sπ	REET ADDRESS	MILWARD & CO., 2745 W CPYR	ESS CREEK RD		4.3 STREET	ADDRESS					
Сп	Y-ST-ZIP	FT LAUDERDALE FL			4.4 CITY-S	T-ZIP					
TIT		VP	□ D	ELETE	5.1 TITLE			-	Change	☐ Addition	
NAI	ME :	KLATT, LAWRENCE			5.2 NAME	1					
STI	REET ADDRESS	500 NW 20TH ST. RM 157			5.3 STREET	ADDRESS					
CIT	Y-ST-ZIP	BOCA RATON FL			5.4 CITY-S	T-ZIP					
TIT		SD		ELETE	6.1 TITLE				Change	Addition	
NA	ME	SIEGEL, DONNA		i	6.2 NAME	}					
l	REET ADDRESS				6.3 STREET	ADORESS	•				
cπ	V-ST-7IP	ROCA RATON EL 33487			6.4 CITY-S						
14	I hereby o	certify that the information supplied with	this filing does not	qualify for th	e exempti	ion stated	in Section 119.07(3)(i), Florida Statutes.	further certify	that the in	formation	

indicated on this annual report or supplemental annual report is true and accurate and mar my signature shall have the same legal effect as it made under oath, marrial and 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

CKZEU3/ (11/98)

=:=

Applied For

Not Applicable