

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED  
Jan 18, 2009  
Secretary of State

DOCUMENT# N07716

Entity Name: GOLD COAST VENTURE CAPITAL CLUB, INC.

**Current Principal Place of Business:**

777 SOUTH FLAGLER DRIVE  
SUITE 500E  
WEST PALM BEACH, FL 33401

**New Principal Place of Business:**

**Current Mailing Address:**

O. O. BOX 27-3281  
BOCA RATON, FL 334273281 US

**New Mailing Address:**

P. O. BOX 27-3281  
BOCA RATON, FL 334273281 US

FEI Number: 59-2506073

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BATES, DAVID G  
C/O GUNSTER, YOAKLEY & STEWART, P.A.  
777 SOUTH FLAGLER DRIVE, SUITE 500E  
WEST PALM BEACH, FL 33401 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: DP ( ) Delete  
Name: BATES, DAVID  
Address: 777 S. FLAGLER DR. #500E  
City-St-Zip: WEST PALM BEACH, FL 33401 US

Title: DS ( ) Delete  
Name: PSOINOS, GEORGE  
Address: P.O. BOX 27-3281  
City-St-Zip: BOCA RATON, FL 33427

Title: DT ( ) Delete  
Name: WASSERMAN, ADAM  
Address: P.O. BOX 27-3281  
City-St-Zip: BOCA RATON, FL 33427

Title: DEVP ( ) Delete  
Name: MCMILLEN, WILLIAM  
Address: P.O. BOX 27-3281  
City-St-Zip: BOCA RATON, FL 33427

Title: DVP ( ) Delete  
Name: PECK, ANDREW  
Address: P.O. BOX 27-3281  
City-St-Zip: BOCA RATON, FL 33427

Title: DVP ( ) Delete  
Name: HOGUE, THOMAS  
Address: P.O. BOX 27-3281  
City-St-Zip: BOCA RATON, FL 33427

**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:

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: WILLIAM MCMILLEN

EVP

01/18/2009

Electronic Signature of Signing Officer or Director

Date