

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09101

FILED  
Mar 16, 2012  
Secretary of State

**Entity Name:** GOLD COAST WOMEN VETERANS, INC.

**Current Principal Place of Business:**

2201 N W 62 TERRACE  
MARGATE, FL 33063 US

**New Principal Place of Business:**

**Current Mailing Address:**

2201 N W 62 TERRACE  
MARGATE, FL 33063 US

**New Mailing Address:**

**FEI Number:** 59-2511521

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ELWOOD, ZORA Y  
2201 N W 62 TERRACE  
MARGATE, FL 33963 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: PD  
Name: CASTELLI, JOANNE M  
Address: 1143 HAMPTON BLVD.  
City-St-Zip: NO. LAUDERDALE, FL 33068 US

Title: TD  
Name: ELWOOD, ZORA Y  
Address: 2201 N W 62 TERRACE  
City-St-Zip: MARGATE, FL 33063

Title: VD  
Name: BEECHER, RUTH  
Address: 143 S LAUREL DR BLDG 6  
City-St-Zip: MARGATE, FL 33063 US

Title: SD  
Name: MANOLAKIS, MOLLY  
Address: 9610 NW 83 ST.  
City-St-Zip: TAMARAC, FL 33321

Title: VD  
Name: GLASSMAN, SHIRLEY  
Address: 235 CAPRI E  
City-St-Zip: DELRAY BEACH, FL 33484 US

Title: SD  
Name: MARSHALL, ALYCE  
Address: 5030 NW 42 ST.  
City-St-Zip: FORT LAUDERDALE, FL 33319

I hereby 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 all other like empowered.

SIGNATURE: ZORA Y ELWOOD

TD

03/16/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date