FILED Jan 21, 2003 8:00 am Secretary of State

01-21-2003 90136 005 ****61.25

GOLD COAST WOMEN VETERANS, INC. Principal Place of Business Mailing Address 4200 MAINLAND DR **440008789** 4200 MAINLAND DR TAMARAC FL 33319 TAMARAC FL 33319 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CHECK HERE IF MAKING CHANGES City & State City & State 4. FEI Number 59-2511521 Applied For Zip Not Applicable Country Zip Country 5. Certificate of Status Desired \$8.75 Additional 6. Name and Address of Current Registered Agent Fee Required 7. Name and Address of New Registered Agent Name GOULART, DORIS D = Street Address (P.O. Box Number is Not Acceptable) 4200 MAINLAND DRIVE TAMARAC FL 33319-5840 City Zip Code 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 title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Trust Fund Contribution. Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE ☐ Delete TITLE PD OWNBY, MIRIAM NAME **EX** Change ☐ Addition NAME OWNBY, MIRIAM STREET ADDRESS 351 NW 134 WAY STREET ADDRESS CITY-ST-ZIP 122 ROYAL PARK DR. PLANTATION FL 33325 CITY-ST-7IP OAKLAND PARK FEL 33309 TITLE Delete TITLE GOULART, DORIS D NAME ☐ Change Addition NAME STREET ADDRESS 4200 MAINLAND DR STREET ADDRESS CITY-ST-7IP TAMARAC FL 33319 CITY-ST-ZIP ٧D٠ TITLE Delete TITLE WESTIN, EUNICE NAME ☐ Change NAME ANTON, JOSEPHINE 2502 SW 15 ST STREET ADDRESS STREET ADDRESS CITY-ST-ZIP DEERFIELD BEACH FL 33442 45 PRESTON B CITY-ST-ZIP TITLE BOCA RATON, FL 33434 x Delete TITLE NAME COOKE, HELEN Change XX Addition NAME STREET ADDRESS 7300 N DAVIE ROAD, EXT. #220 MANOLAKIS, MOLLY STREET ADDRESS CITY-ST-ZIP HOLLYWOOD FL 33024 CITY-ST-7IP 9610 NW 83 ST. TITLE 3332] Change TAMARAC, FL **X** XDelete TITLE BURCH, MARY NAME X Addition NAME STREET ADDRESS 8620 SW 18 CT STREET ADDRESS HELDMAN, H. SHERRY CITY-ST-ZIP FORT LAUDERDALE FL 33324 778 WEST CAMINO REAL CITY-ST-ZIP BOCA RATON, FL XX Delete TITLE 33486 BEECHER, RUTH B NAME Change X Addition STREET ADDRESS 143 S LAUREL DR BLDG 6 REICH, NETTIE STREET ADDRESS CITY-ST-ZIP POMPANO BEACH FL 33063 2257 SW 15 ST CITY-ST-ZIP

2003 NOT-FOR-PROFIT CORPORATION

UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N09101

1. Entity Name

TITLE

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes, I further certify that the information 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

SIGNATURE: DORTS CON GOULART RECOLUT Part JANUARY 17, 2003

954-733-6428

õ CR2E037