FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION
ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
[illegible]
[illegible] 1995 [illegible]:15
FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N09544 (0)

1. Corporate Name

GOLD COAST POOL LEAGUE, INC.

Principal Place of Business

C/O HOWITT, STUART
7310 W. MCNALO ROAD, SUITE 207
TAMARAC FL 33321
US

Mailing Address

C/O HOWITT, STUART
7310 W. MCNALO ROAD SUITE 207
TAMARAC FL 33321
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 05/31/1985
3a. Date of Last Report: 05/01/1994
4. FEI Number: 59-2623573 — Applied For / Not Applicable

2. Principal Place of Business — 21
2a. Mailing Address — 26
Suite Apt. # or — 22 / 27
City & State — 23 / 28
Zip — 24 / Country — 25 / Zip — 29 / Country — 30

5. Certificate of Status Desired [ ] $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution [ ] $5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)3 Tax Exempt Status [ ] $68.75 Supplemental Fee Not Required
8. Does corporation qualify for minority fee under S. 607.0122, Florida Statutes? [X] Yes [ ] No

9. Name and Address of Current Registered Agent

HOWITT, STUART
7310 W MCNAB RD STE 207
TAMARAC FL 33321

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City: FL 85 Zip Code

11. Pursuant to the provisions of Section 607.0505, Florida Statutes, the undersigned corporation adopts the following 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 or by the officer or officers duly authorized by the board of directors to make such changes.

SIGNATURE

12. Officers and Directors

TITLE	D
NAME	FULNER, PATRICIA
Street Address	3670 N STATE RD 7
City, St, Zip	LAUDERDALE LAKES FL
TITLE	D
NAME	COLWILL, TEBEN
Street Address	3670 N STATE RD 7
City, St, Zip	LAUDERDALE LAKES FL
TITLE	D
NAME	DAWSON, NEDRA
Street Address	1609 S.W. 13 CT.
City, St, Zip	FT. LAUDERDALE FL
TITLE	
NAME	
Street Address	
City, St, Zip	
TITLE	
NAME	
Street Address	
City, St, Zip	

13. Additions, Changes, Deletions

TITLE	[ ] Change [ ] Addition
NAME	
Street Address	
City, St, Zip	
TITLE	[ ] Change [ ] Addition
NAME	
Street Address	
City, St, Zip	
TITLE	[ ] Change [ ] Addition
NAME	
Street Address	
City, St, Zip	
TITLE	[ ] Change [ ] Addition
NAME	
Street Address	
City, St, Zip	
TITLE	[ ] Change [ ] Addition
NAME	
Street Address	
City, St, Zip	
TITLE	[ ] Change [ ] Addition
NAME	
Street Address	
City, St, Zip	

14. I hereby certify that the information contained with the report is accurately transcribed and that, to the best of my knowledge, I have complied with the requirements of Section 607.0505, Florida Statutes. I further certify that the information indicates the principal place of business and mailing address of the corporation and that the signature shall have the same legal effect as made under oath. I hereby certify that I am the officer or director listed, the corporation's attorney, or the person authorized to make this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 or is attached with an address.

SIGNATURE: [signature] 4-23-95 305-979-2755
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

0046900