2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2005
Secretary of State

DOCUMENT# N09544

Entity Name: GOLD COAST POOL LEAGUE, INC.

Current Principal Place of Business:

FAYE METZ
PO BOX 938432
MARGATE, FL 330938432 US

New Principal Place of Business:

Current Mailing Address:

FAYE METZ
PO BOX 938432
MARGATE, FL 330938432 US

New Mailing Address:

FEI Number: 59-2623573 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BURBANK, CAROL A
10825 NW 29H MANOR #7
SUNRISE, FL 33322 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	( ) Delete
Name:	CYCEONE, HELDI	
Address:	8241 NW 74TH AVE	
City-St-Zip:	TAMARAC, FL 33321	
Title:	TD	( ) Delete
Name:	BURBANK, CAROL	
Address:	10825 NW 29TH MANOR #7	
City-St-Zip:	SUNRISE, FL 33322 US	
Title:	VD	( ) Delete
Name:	METZ, FAYE	
Address:	6760 WINFIELD BLVD	
City-St-Zip:	MARGATE, FL 330637112	
Title:	VP	( ) Delete
Name:	GEORGE, TAMMIE	
Address:	12900 SW 17 PLACE	
City-St-Zip:	DAVIE, FL 33325	

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:	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: CAROL A BURBANK TD 04/29/2005
Electronic Signature of Signing Officer or Director — Date