

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09544

FILED
Apr 20, 2009
Secretary of State

Entity Name: GOLD COAST POOL LEAGUE, INC.

Current Principal Place of Business:

8101 NW 74 AVE.
TAMARAC, FL 33321 US

New Principal Place of Business:

Current Mailing Address:

8101 NW 74 AVE.
TAMARAC, FL 33321 US

New Mailing Address:

FEI Number: 59-2623573

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ALLIN, MICHELLE
8101 NW 74 AVE.
TAMARAC, FL 33321 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: MARTIN-CULET, CHRIS
Address: 6175 SOUTHGATE BLVD
City-St-Zip: MARGATE, FL 33068

Title: TSD () Delete
Name: ALLIN, MICHELLE
Address: 8101 NW 74 AVE.
City-St-Zip: TAMARAC, FL 33321 US

Title: D () Delete
Name: NORMAN, CINDY
Address: 6175 SOUTHGATE BLVD
City-St-Zip: MARGATE, FL 33068 US

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:

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: MICHELLE ALLIN

TSD

04/20/2009

Electronic Signature of Signing Officer or Director

Date