FILED

03 FEB 21 AM 9:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N09544

1. Entity Name
GOLD COAST POOL LEAGUE, INC.

Principal Place of Business	Mailing Address
FAYE METZ PO BOX 938432 MARGATE, FL 33093-8432 US	FAYE METZ PO BOX 938432 MARGATE, FL 33093-8432 US

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number 59-2623573 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
METZ, FAYE 6760 WINFIELD BLVD MARGATE, FL 33063-7112	Name: CAROL A. BURBANK Street Address (P.O. Box Number is Not Acceptable): 10825 NW 29TH MANOR # 7 City: SUNRISE FL Zip Code: 33322

8. 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: Carol A Burbank 2/10/2003
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent's signature required when electronically) DATE

FILE NOW: FEE IS $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

Make Check Payable to: Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD CYCEONE, HELDI 8241 NW 74TH AVE TAMARAC, FL 33321	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD BURBANK, CAROL 200 SW 6TH STREET FORT LAUDERDALE, FL 33301	☐ Delete	10825 NW 29th MANOR #7 SUNRISE, FL 33322	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD METZ, FAYE PO BOX 938432 MARGATE, FL 330938432	☐ Delete	6760 WINFIELD BLVD MARGATE, FL 33063-7112	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD ALLIN, MICHELLE 8101 NW 74TH AVE TAMARAC, FL 33321	☒ Delete	800012953365 02/21/03--01072--017 **5.25	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	[redacted]	☐ Delete	VP TAMMIE	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP TAMMIE GEORGE 12900 SW 17 PLACE DAVIE, FL 33325	☐ Delete		☐ Change ☒ Addition

CR2E037 (10/02)

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 indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Carol A Burbank 2/10/03
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

JS 2/24