

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N22621

1. Entity Name

GOLD COAST PROGRESSIVE FIREFIGHTERS ASSOC. OF PA

FILED
Aug 24, 2000 8:00 am
Secretary of State

08-24-2000 90002 037 ****61.25

Principal Place of Business

PO BOX 926
 WEST PALM BEACH FL 33401

Mailing Address

PO BOX 926
 WEST PALM BEACH FL 33401

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0069140

Applied For

Not Applicable

Zip

Country

Zip

Country

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

WILLIAMS, MICHAEL
4852-B ORLEANS CT.
WEST PALM BEACH FL 33415

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

After September 13, 2000 min. will be \$236.25

9. Election Campaign Financing
 Trust Fund Contribution. ☐

**\$5.00 May Be
 Added to Fees**

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☐ Delete
 NAME TURNQUEST, RHETT
 STREET ADDRESS 1429 6TH STREET
 CITY-ST-ZIP WEST PALM BEACH FL 33401

TITLE PD ☒ Change ☐ Addition
 NAME Turnquest, Rhett
 STREET ADDRESS 2055 Tigris Drive
 CITY-ST-ZIP West Palm Beach, FL. 33411

TITLE VD ☒ Delete
 NAME HERBERT, IRY
 STREET ADDRESS 301-W. 22ND ST.
 CITY-ST-ZIP RIVIERA BEACH FL

TITLE VD ☒ Change ☐ Addition
 NAME Tania R. Maxwell
 STREET ADDRESS 5520 No. Haverhill Rd. #26
 CITY-ST-ZIP West Palm Beach, FL 33407

TITLE TD ☐ Delete
 NAME WILLIAMS, MICHAEL
 STREET ADDRESS 4852-B ORLEANS CT
 CITY-ST-ZIP W PALM BCH FL

TITLE ☐ Change ☒ Addition
 NAME
 STREET ADDRESS 33415
 CITY-ST-ZIP

TITLE BMD ☐ Delete
 NAME SANTAS, GORDAN
 STREET ADDRESS 1900 N CONGRESS AVE
 CITY-ST-ZIP W PALM BCH FL

TITLE ☐ Change ☒ Addition
 NAME
 STREET ADDRESS 33407
 CITY-ST-ZIP

TITLE TD ☐ Delete
 NAME RICH, TITUS
 STREET ADDRESS 617 S MANGONIA CIR
 CITY-ST-ZIP WEST PALM BEACH FL

TITLE ☒ Change ☐ Addition
 NAME Sgt. of Arms / D
 STREET ADDRESS Rich, Titus
 CITY-ST-ZIP 617 So. Mangonia Cir
 West Palm Beach, Florida 33407

TITLE SD ☐ Delete
 NAME BLOCKSON, PAUL
 STREET ADDRESS 1802 PIERCE DR
 CITY-ST-ZIP LAKE WORTH FL

TITLE ☐ Change ☒ Addition
 NAME
 STREET ADDRESS 33460
 CITY-ST-ZIP

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 persons empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

8/21/00 (561) 683-2197

CR2E037 (5/00)