

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N28761

FILED
Jun 29, 2009
Secretary of State

Entity Name: GOLD COAST CHRISTIAN CATHEDRAL, INC.

Current Principal Place of Business:

6751 N FED HWY
STE 201
BOCA RATON, FL 33487 US

New Principal Place of Business:

Current Mailing Address:

6751 N FED HWY
STE 201
BOCA RATON, FL 33487 US

New Mailing Address:

FEI Number: 65-0077708 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

REED, RANDALL H CPA
6751 N FED HWY STE 201
BOCA RATON, FL 33487 US

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: D () Delete
Name: CROFT, JAMES
Address: 8942 SONOMA LAKE BLVD
City-St-Zip: BOCA RATON, FL 33434

Title: D () Delete
Name: CROFT, PRUDENCE
Address: 8942 SONOMA LAKE BLVD
City-St-Zip: BOCA RATON, FL 33434

Title: D () Delete
Name: ROBERT BYERS
Address: 4121 NE 17TH TERR
City-St-Zip: POMPANO BCH, FL 33064

Title: D () Delete
Name: MARCIANO, FRANK
Address: 11744 BAYFIELD DR
City-St-Zip: BOCA RATON, FL 33498

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 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: JAMES CROFT

D

06/29/2009

Electronic Signature of Signing Officer or Director

Date