

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N38684

FILED  
Mar 10, 2009  
Secretary of State

Entity Name: GOLD COAST CHRISTIAN SCHOOL, INC.

**Current Principal Place of Business:**

5100 WEST HILLSBORO BLVD  
COCONUT CREEK, FL 33073

**New Principal Place of Business:**

**Current Mailing Address:**

5100 WEST HILLSBORO BLVD  
COCONUT CREEK, FL 33073

**New Mailing Address:**

FEI Number: 59-1163452      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

FERDINAND, JON JAY, ESQUIRE  
5100 WEST HILLSBORO BLVD  
COCONUT CREEK, FL 33073      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: WILLIAMSON, JERRY  
Address: 5100 WEST HILLSBORO BLVD  
City-St-Zip: COCONUT CREEK, FL 33073

Title: SD      ( ) Delete  
Name: THOMAS, HUDSON  
Address: 3139 BAYBERRY WAY  
City-St-Zip: MARGATE, FL 33063

Title: TD      ( ) Delete  
Name: WHALEY, TERRY  
Address: 5700 NW 50TH STREET  
City-St-Zip: CORAL SPRINGS, FL 33067

Title:      ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: CD      (X) Change ( ) Addition  
Name: THOMAS, HUDSON  
Address: 3139 BAYBERRY WAY  
City-St-Zip: MARGATE, FL 33063

Title: TD      (X) Change ( ) Addition  
Name: CYRUS, PATRICK  
Address: 2731 NW 105TH TERRACE  
City-St-Zip: CORAL SPRINGS, FL 33065

Title: SD      ( ) Change (X) Addition  
Name: BURGESS, MICHAEL  
Address: 4277 NW 89TH AVENUE, #204  
City-St-Zip: CORAL SPRINGS, FL 33065

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: JERRY WILLIAMSON

PD

03/10/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date