2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 06, 2009
Secretary of State

DOCUMENT# N39122

Entity Name: GOLD COAST CHRISTIAN MINISTRIES, INC.

Current Principal Place of Business:

10304 S.W. 87TH COURT
MIAMI, FL 33176 US

New Principal Place of Business:

Current Mailing Address:

% JOHN ALESSI
10304 S.W. 87TH COURT
MIAMI, FL 33176 US

New Mailing Address:

FEI Number: 65-0206412 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ALESSI, JOHN REV.
10304 S.W. 87TH COURT
MIAMI, FL 33176 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:	P	( ) Delete
Name:	ALESSI, JOHN	
Address:	10304 S.W. 87TH COURT	
City-St-Zip:	MIAMI, FL 33176 US	
Title:	DST	( ) Delete
Name:	ALESSI, ANNIE L.,	
Address:	10304 S.W. 87TH CT.	
City-St-Zip:	MIAMI, FL 33176 US	
Title:	VPD	( ) Delete
Name:	ALESSI, J. STEPHEN	
Address:	16435 S.W. 88TH AVE.	
City-St-Zip:	MIAMI, FL 33157 US	
Title:	D	( ) Delete
Name:	MOREHEAD, RICHARD,	
Address:	8100 SW 104 ST	
City-St-Zip:	MIAMI, FL 33156 US	
Title:	D	( ) Delete
Name:	ALESSI, PAUL	
Address:	8100 SW 104 ST	
City-St-Zip:	MIAMI, FL 33156 US	
Title:	D	( ) Delete
Name:	RIVERA, DARLENE	
Address:	10304 S.W. 87TH COURT	
City-St-Zip:	MIAMI, FL 33176 US	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	DST	(X) Change ( ) Addition
Name:	ALESSI, ANNIE L	
Address:	10304 S.W. 87TH CT.	
City-St-Zip:	MIAMI, FL 33176 US	
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: ANNIE L. ALESSI DST 02/06/2009

Electronic Signature of Signing Officer or Director — Date