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Apr 28 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N93000005531 (9)

1. Corporation Name

GOLDCOAST CHAPTER OF SWEET ADELINES INTERNATIONAL CORPORATION

Principal Place of Business

Mailing Address

9290 MARTINIQUE DR.
MIAMI FL 33189

9290 MARTINIQUE DR.
MIAMI FL 33189-1726

3. Date Incorporated or Qualified
12/08/1993

3a. Date of Last Report
08/12/1996

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

4. FEI Number
65-0453320

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐

\$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

GRAU, MARGE
9290 MARTINIQUE DR.
MIAMI FL 33189

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME **DT**
MORGAN, VIVIAN
STREET ADDRESS **15 ALCANTARA AVE.**
CITY-ST-ZIP **CORAL GABLES FL 33134**

TITLE ☒ DELETE

NAME **D**
BASS, GLYNNA
STREET ADDRESS **12750 SW 103RD TERRACE**
CITY-ST-ZIP **MIAMI FL 33186**

TITLE ☒ DELETE

NAME **D**
CARBONE, RITA
STREET ADDRESS **2304 CYPRESS BEND DRIVE SOUTH, #B-312**
CITY-ST-ZIP **POMPANO BEACH FL 33069**

TITLE ☐ DELETE

NAME **DV**
CARDILLO, JO
STREET ADDRESS **11218 RHAPSODY RD.**
CITY-ST-ZIP **COOPER CITY FL 33026**

TITLE ☒ DELETE

NAME **DS**
RISSMILLER, LORRAINE
STREET ADDRESS **621 SW 68 BLVD.**
CITY-ST-ZIP **PEMBROKE PINES FL 33023**

TITLE ☒ DELETE

NAME **DP**
GRAU, MARGE
STREET ADDRESS **9290 MARTINIQUE DR.**
CITY-ST-ZIP **MIAMI FL 33189**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

NAME **DS**
MORAN, VIVIAN
STREET ADDRESS **12295 SW 151 St. #E-107**
CITY-ST-ZIP **MIAMI, FL 33186**

2.1 TITLE ☐ Change ☒ Addition

NAME **DV**
SHISKIN, JEAN
STREET ADDRESS **15001 EGAN LANE**
CITY-ST-ZIP **MIAMI LAKES, FL 33014**

3.1 TITLE ☐ Change ☒ Addition

NAME **DT**
ABRAMS, JOANN
STREET ADDRESS **4408 WOODFIELD BLVD**
CITY-ST-ZIP **BOCA RATON FL 33434**

4.1 TITLE ☒ Change ☐ Addition

NAME **DP**
CARDILLO, JO
STREET ADDRESS **11218 RHAPSODY ROAD**
CITY-ST-ZIP **COOPER CITY FL 33026**

5.1 TITLE ☐ Change ☒ Addition

NAME **D**
DUDRA, MARCY
STREET ADDRESS **2624 MARATHON LANE**
CITY-ST-ZIP **FT LAUDERDALE FL 33312**

6.1 TITLE ☐ Change ☒ Addition

NAME **D**
FARGO, JOY
STREET ADDRESS **164 SE 27th AVE**
CITY-ST-ZIP **BOYNTON BEACH, FL 33435**

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

CR2E037 (9/96)