

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N93000005531

**FILED**  
**Feb 16, 2010**  
**Secretary of State**

**Entity Name:** GOLDCOAST CHAPTER OF SWEET ADELINES INTERNATIONAL CORPORATION

**Current Principal Place of Business:**

1637 MICANOPY AVE.  
MIAMI, FL 33133

**New Principal Place of Business:**

**Current Mailing Address:**

1637 MICANOPY AVE.  
MIAMI, FL 33133

**New Mailing Address:**

**FEI Number:** 65-0453320

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

TAMARA, THEM MEN  
1637 MICANOPY AVE  
MIAMI, FL 33133 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: D  
Name: GUADAMUZ, LYNNE  
Address: 21100 COVE ROAD  
City-St-Zip: MIAMI, FL 33189

Title: D  
Name: COKEROFT, IRIS  
Address: 8820 SW 97 TERRACE  
City-St-Zip: MIAMI, FL 33176

Title: D  
Name: SPARKS, ANNE  
Address: 3790 S.W. 68 AVE  
City-St-Zip: MIAMI, FL 33155

Title: PD  
Name: THEM MEN, TAMMY  
Address: 1637 MICANOPY AVE  
City-St-Zip: MIAMI, FL 33133

Title: D  
Name: ROUDENBUSH, ROBBIE  
Address: 191 W 15TH ST  
City-St-Zip: HIALEAH, FL 33010

Title: D  
Name: STRUBBE, BARBARA  
Address: 13840 SW 74 AVE  
City-St-Zip: MIAMI, FL 33158

I hereby 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 all other like empowered.

SIGNATURE: TAMARA THEM MEN

PRES

02/16/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date