

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2006 8:00 am
Secretary of State

04-24-2006 90369 038 ****61.25

DOCUMENT # N94000005600

1. Entity Name
GOLD COAST CUTTERS, INC.



Principal Place of Business
**13630 77TH ST
FELLSMERE, FL 32948**

Mailing Address
**13630 77TH ST
FELLSMERE, FL 32948**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01042006 Chg-NP CR2E037 (11/05)

4. FEI Number
65-0603019

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**NIES, REBECCA
13630 77TH STREET
FELLSMERE, FL 32948**

Name

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

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Rebecca Nies

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

(NOTE: Registered Agent signature required when reinstating)

DATE

4-11-06

**Filing Fee is \$61.25
Due by May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE VP ☐ Delete
NAME NIES, BARRY
STREET ADDRESS 13630 77TH ST
CITY-ST-ZIP FELLSMERE, FL 32948

TITLE P ☐ Delete
NAME ADDISON, STEVE
STREET ADDRESS 8220 REVELS RD
CITY-ST-ZIP RIVERVIEW, FL 33569

TITLE D ☒ Delete
NAME TYRRELL, NICOLE
STREET ADDRESS P.O. BOX 2331
CITY-ST-ZIP CLEWISTON, FL 33440

TITLE D ☐ Delete
NAME MCMANUS, CHARLEEN
STREET ADDRESS 15830 42ND
CITY-ST-ZIP LOXAHATCHEE, FL 33470

TITLE D ☒ Delete
NAME BELLO, JORGE
STREET ADDRESS 20925 SW 238
CITY-ST-ZIP HOMESTEAD, FL 33031

TITLE D ☒ Delete
NAME VALDES, AROLD
STREET ADDRESS 12500 SW 45 ST
CITY-ST-ZIP MIAMI, FL 33175

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME Director
STREET ADDRESS George Baxter
CITY-ST-ZIP P.O. Box 1001
Lake Placid, FL 33862

TITLE ☐ Change ☐ Addition
NAME ~~Director~~
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME Director
STREET ADDRESS Tommy Dees
CITY-ST-ZIP 17045 Hwy 741N
Okeechobee, FL 34972

TITLE ☐ Change ☒ Addition
NAME Director
STREET ADDRESS Al Scott
CITY-ST-ZIP 365 Nieuport Dr.
Vero Beach, FL 32968

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Rebecca Nies / REBECCA NIES

4-11-06 (772) 571-0485

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #