2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N9600000615

FILED Feb 12, 2009 Secretary of State

Entity Name: THE GOLD COAST TREASURE CLUB, INC. **Current Principal Place of Business: New Principal Place of Business:** 206 RUSSELL DR LAKE WORTH, FL 33461 **Current Mailing Address: New Mailing Address:** 206 RUSSELL DR LAKE WORTH, FL 33461 FEI Number: 65-0807394 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BOUYOUCAS, ERNIE SPIROCH, MINDY 112 LONGFELLOW DRIVE 7493 SALLY LYN LANE PALM SPRINGS, FL 33461 US LAKE WORTH, FL 33467 US 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: JANET M. SMIRNOW 02/12/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: VPD () Change () Addition () Delete DELUCIA, STACEY Name: Name: 4369 WILLOW BROOK CIRCLE Address: Address: City-St-Zip: WEST PALM BEACH, FL 33417 City-St-Zip: Title: () Delete Title: (X) Change () Addition BOUYOUCAS, ERNIE Name: Name: SPIROCH, MINDY Address: 112 LONGFELLOW DRIVE Address: 7493 SALLY LYN LANE City-St-Zip: PALM SPRINGS, FL 33461 City-St-Zip: LAKE WORTH, FL 33467 Title: () Delete Title: () Change () Addition LUBINSKI, KENNETH Name: Name: Address: P. O. BOX 1818 Address: City-St-Zip: HOBE SOUND, FL 33475 City-St-Zip: Title: SD () Delete Title: () Change () Addition SMIRNOW, JANET Name: Name: 5566 AINSLEY COURT Address: Address: City-St-Zip: BOYNTON BEACH, FL 33417 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: JANET SMIRNOW SD 02/12/2009