## 2002 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT# P01000099725

Entity Name: GOLD COAST SETTLEMENT SERVICES, INC.

May 01, 2002 8:00 AM Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 900 S ANDREWS AVE FT LAUDERDALE, FL 333161000 **Current Mailing Address: New Mailing Address:** 900 S ANDREWS AVE FT LAUDERDALE, FL 333161000 FEI Number: 65-1143612 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: WITHERWAX, WENDI-SIOUX 10181 W SAMPLE RD #201 CORAL SPRINGS, FL 330653956 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: Electronic Signature of Registered Agent Date This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X). Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete () Change () Addition ROCHLIN, DEBRA P Name: Name: 900 S ANDREWS AVE Address: Address: City-St-Zip: FT LAUDERDAL E, FL 33316 City-St-Zip: ( ) Delete Title: VD Title: () Change () Addition Name: CAWOOD, JOHN Name: 10181 W SAMPLE RD #201 Address: Address: CORAL SPRINGS, FL 330653956 City-St-Zip: City-St-Zip: ( ) Delete Title: Title: () Change () Addition WITHERWAX, WENDI-SIOUX Name: Name: 10181 W SAMPLE RD #201 Address: Address: City-St-Zip: CORAL SPRINGS, FL 330653956 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WENDI-SIOUX WITHERWAX STD 05/01/2002