

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000057230

FILED  
Apr 09, 2008  
Secretary of State

**Entity Name:** GREAT EXPECTATIONS OF THE TREASURE COAST, INC.

**Current Principal Place of Business:**

759 S. FEDERAL HWY., STE 208  
STUART, FL 34994

**New Principal Place of Business:**

4800 NORTH FEDERAL HIGHWAY  
SUITE 100E  
BOCA RATON, FL 33431

**Current Mailing Address:**

759 S. FEDERAL HWY., STE 208  
STUART, FL 34994

**New Mailing Address:**

4800 NORTH FEDERAL HIGHWAY  
SUITE 100E  
BOCA RATON, FL 33431

**FEI Number:** 20-0032997

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MARGOLIS, DAVID  
4800 NORTH FEDERAL HIGHWAY  
SUITE 100E  
BOCA RATON, FL 33431 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

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: MARGOLIS, DAVID  
Address: 4800 NORTH FEDERAL HIGHWAY, SUITE E100  
City-St-Zip: BOCA RATON, FL 33431

Title: VP ( ) Delete  
Name: BRANDT, MITCHELL  
Address: 4800 NORTH FEDERAL HIGHWAY, SUITE B100  
City-St-Zip: BOCA RATON, FL 33431

Title: VP ( ) Delete  
Name: LEVINE, MICHAEL  
Address: 4800 NORTH FEDERAL HIGHWAY, SUITE B100  
City-St-Zip: BOCA RATON, FL 33431

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** DAVID MARGOLIS

PD

04/09/2008

Electronic Signature of Signing Officer or Director

Date