

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000164354

Entity Name: GOLD COAST TRANSIT, INC.

FILED
Apr 17, 2009
Secretary of State

Current Principal Place of Business:

888 SE THIRD AVE STE 501
FORT LAUDERDALE, FL 33316

New Principal Place of Business:

2380 COLLEGE AVE
DAVIE, FL 33317

Current Mailing Address:

888 SE THIRD AVE STE 501
FORT LAUDERDALE, FL 33316

New Mailing Address:

PO BOX 292037
DAVIE, FL 33329

FEI Number: 20-2071096

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FORMAN, M. AUSTIN
888 SE THIRD AVE
FORT LAUDERDALE, FL 33316 US

Name and Address of New Registered Agent:

FORMAN, M. AUSTIN
888 SE THIRD AVE
501
FORT LAUDERDALE, FL 33316 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

04/17/2009

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: OLIVER, ALISON
Address: 888 SE THIRD AVE
City-St-Zip: FORT LAUDERDALE, FL 33316

Title: VP () Delete
Name: FORMAN, CHRISTINE
Address: 888 SE THIRD AVE
City-St-Zip: FORT LAUDERDALE, FL 33316

Title: SD () Delete
Name: FORMAN, M. AUSTIN
Address: 888 SE THIRD AVE
City-St-Zip: FORT LAUDERDALE, FL 33316

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: M AUSTIN FORMAN

Electronic Signature of Signing Officer or Director

D

04/17/2009

Date