


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 05, 2007 08:00 AM
Secretary of State

DOCUMENT # P05000044830 1. Entity Name GOLD COAST SURVEYORS, INC.		
Principal Place of Business 1150 E ATLANTIC BLVD POMPANO BEACH, FL 33060	Mailing Address 1150 E ATLANTIC BLVD POMPANO BEACH, FL 33060	
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent LENSON, MARK 4400 NORTH FEDERAL HIGHWAY SUITE 208 BOCA RATON, FL 33431		DO NOT WRITE IN THIS SPACE
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: <u>N/A</u> (NOTE: Registered Agent signature required when reinstating) DATE: _____		
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS LENSON, MARK 1340 SW 17TH STREET BOCA RATON, FL 33486	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP LOPEZN, SUSAN A 817 NE 70TH STREET BOCA RATON, FL 33487	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V THOMPSON, ROBERT L 1150 E ATLANTIC BLVD POMPANO BEACH, FL 33060	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, for all other like empowered.		
SIGNATURE: <u>[Signature]</u> AS D.S. FOR GOLD COAST SURVEYORS INC. 2/26/07 561-400-2881 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #		



02262007 No Chg-P CR2E034 (11/05)

4. FEI Number 20-2004119	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

U00000654690
03/13/07-80074-003 150.00

DO NOT WRITE IN THIS SPACE