

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

CORPORATION  
ANNUAL REPORT  
1995



FLORIDA DEPARTMENT OF STATE  
Sandra B. Norstrom  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

95 JUL -3 AM 8:30

DOCUMENT # **P93000042357 (2)**

1. Corporation Name

**GOLD COAST AGENCY, INC.**

Principal Place of Business

**11701 N.W. 12TH STREET  
PLANTATION FL 33323**

Mailing Address

**11701 N.W. 12TH STREET  
PLANTATION FL 33323**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

**06/09/1993**

3a. Date of Last Report

**08/01/1994**

4. FEI Number

**65-0133589**

Applied For

Not Applicable

5. Certificate of Status Desired

**\$8.75 Additional  
Fee Required**

6. Election Campaign Financing  
Trust Fund Contribution

**\$5.00 May Be  
Added to Fees**

8. This corporation has liability for intangible tax under S. 199.032,  
Florida Statutes  Yes  No

2. Principal Place of Business

21

State, Apt. # etc.

2a. Mailing Address

26

State, Apt. # etc.

22

City & State

27

City & State

23

Zip

Country

28

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

**HAGGERTY, GLORIA  
11701 N.W. 12TH STREET  
PLANTATION FL 33323**

10. Name and Address of New Registered Agent

B1 Name

B2 Street Address (P.O. Box Number is Not Acceptable)

B3

B4 City

**FL**

B5 Zip Code

11. Applicant to the provisions of Sections 607.0607 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

(Print or type in capital letters the name of registered agent and the corporation)

(Print or type in capital letters the name of registered agent and the corporation)

(Date)

12. OFFICERS AND DIRECTORS

OFFICERS AND DIRECTORS

TITLE

**D  
HAGGERTY, GLORIA  
11701 N.W. 12TH STREET  
PLANTATION FL 33323**

NAME

STREET ADDRESS

CITY, ST, ZIP

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

TITLE

NAME

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CITY, ST, ZIP

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CITY, ST, ZIP

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE

Change  Addition

2. NAME

3. STREET ADDRESS

4. CITY, ST, ZIP

5. TITLE

Change  Addition

6. NAME

7. STREET ADDRESS

8. CITY, ST, ZIP

9. TITLE

Change  Addition

10. NAME

11. STREET ADDRESS

12. CITY, ST, ZIP

13. TITLE

Change  Addition

14. NAME

15. STREET ADDRESS

16. CITY, ST, ZIP

17. TITLE

Change  Addition

18. NAME

19. STREET ADDRESS

20. CITY, ST, ZIP

21. TITLE

Change  Addition

22. NAME

23. STREET ADDRESS

24. CITY, ST, ZIP

25. TITLE

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Sections 119.07(1)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath. This filing by an officer or director of the corporation or the receiver or trustee (whichever) to execute this report as required by Chapter 607, Florida Statutes, and that my name appears on Block 12 or Block 13 is (checked) or on an attachment with an address.

SIGNATURE:

*Gloria Haggerty*  
SIGNATURE AND TYPED OR PRINTED NAME OF CURRENT OFFICER OR DIRECTOR

6/25/95

305-472-5264