

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000005297

Entity Name: GOLD COAST TURF, INC.

FILED  
Jan 30, 2005  
Secretary of State

## Current Principal Place of Business:

3110 SW 139TH TERR  
FORT LAUDERDALE, FL 33330 US

## New Principal Place of Business:

9080 EQUUS CIRCLE  
BOYNTON BEACH, FL 33437 US

## Current Mailing Address:

3110 SW 139TH TERR  
FORT LAUDERDALE, FL 33330 US

## New Mailing Address:

13833 WELLINGTON TRACE E-4  
218  
WELLINGTON, FL 33414 US

FEI Number: 65-0639687

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PRESCOTT, WILLIAM PAUL J  
3110 SW 139TH TERR  
JACKSONVILLE, FL 32220 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: PRESCOTT, WILLIAM P  
Address: 3110 SW 139TH AVE  
City-St-Zip: FORT LAUDERDALE, FL 33330

Title: VPD ( ) Delete  
Name: PRESCOTT, JODI  
Address: 13860 SW 33RD COURT  
City-St-Zip: DAVIE, FL 33330

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: PRESCOTT, WILLIAM P  
Address: 9080 EQUUS CIRCLE  
City-St-Zip: BOYNTON BEACH, FL 33437

Title: VPD (X) Change ( ) Addition  
Name: PRESCOTT, JODI  
Address: 9080 EQUUS CIRCLE  
City-St-Zip: BOYNTON BEACH, FL 33437

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: WILLIAM P PRESCOTT

PD

01/30/2005

Electronic Signature of Signing Officer or Director

Date