2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P98000106473

FILED
Jan 16, 2003
Secretary of State

Entity Name: GOLD COAST HOMES OF S.W. FLORIDA, INC.

Current Principal Place of Business:

2422 S.E. 28TH STREET
CAPE CORAL, FL 33904

New Principal Place of Business:

17252 ALICO CENTER RD
SUITE 2
FT MYERS, FL 33912

Current Mailing Address:

2422 S.E. 28TH STREET
CAPE CORAL, FL 33904

New Mailing Address:

17252 ALICO CENTER RD
SUITE 2
FT MYERS, FL 33912

FEI Number: 65-0883645 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CASMAN, DAVID M
2422 S.E. 28TH STREET
CAPE CORAL, FL 33904 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: P/D ( ) Delete
Name: CASMAN, DAVID M
Address: 2422 S.E. 28TH STREET
City-St-Zip: CAPE CORAL, FL 33904

Title: S/T (X) Delete
Name: PERSICHILLI, ANTHONY
Address: 20601 RIVERSFORD ROAD
City-St-Zip: ESTERO, FL 33928

Title: VP ( ) Delete
Name: BOWMAN, WILLIAM T
Address: 7238 HENDRY CREEK DRIVE
City-St-Zip: FORT MYERS, FL 33908

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PDT (X) Change ( ) Addition
Name: CASMAN, DAVID M
Address: 2422 S.E. 28TH STREET
City-St-Zip: CAPE CORAL, FL 33904

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

Title: VP/S (X) Change ( ) Addition
Name: BOWMAN, WILLIAM T
Address: 7238 HENDRY CREEK DRIVE
City-St-Zip: FORT MYERS, FL 33908

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: DAVID M CASMAN P 01/16/2003
Electronic Signature of Signing Officer or Director Date