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**FILED**  
**Mar 10, 1999 8:00 am**  
**Secretary of State**

03-10-1999 90064 009 \*\*\*\*61.25

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NONPROFIT CORPORATION  
 ANNUAL REPORT  
**1999**



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
 Secretary of State  
 DIVISION OF CORPORATIONS

**DOCUMENT # N22621**

1. Corporation Name

**GOLD COAST PROGRESSIVE FIREFIGHTERS ASSOC. OF PA  
 LM BEACH COUNTY, INC.**

Principal Place of Business

PO BOX 926  
 WEST PALM BEACH FL 33401

Mailing Address

PO BOX 926  
 WEST PALM BEACH FL 33401



2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

30

3. Date Incorporated or Qualified

09/22/1987

4. FEI Number

65-0069140

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

9. Name and Address of Current Registered Agent

**WILLIAMS, MICHAEL  
 4852-B ORLEANS CT.  
 WEST PALM BEACH FL 33415**

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

**FL**

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12.

OFFICERS AND DIRECTORS

TITLE  DELETE

NAME **PD  
 TURNQUEST, RHETT**  
 STREET ADDRESS **1429 6TH STREET**  
 CITY-ST-ZIP **WEST PALM BEACH FL 33401**

TITLE  DELETE

NAME **VD  
 HERBERT, IRY**  
 STREET ADDRESS **301 W 22ND ST**  
 CITY-ST-ZIP **RIVIERA BEACH FL**

TITLE  DELETE

NAME **STD  
 WILLIAMS, MICHAEL**  
 STREET ADDRESS **4852-B ORLEANS CT**  
 CITY-ST-ZIP **W PALM BCH FL**

TITLE  DELETE

NAME **BMD  
 PERRY, TROY**  
 STREET ADDRESS **1378 N MAGNOLIA DRIVE**  
 CITY-ST-ZIP **W PALM BCH FL**

TITLE  DELETE

NAME **SGT  
 GREGORY, RANDY**  
 STREET ADDRESS **P.O BOX 926 N/A**  
 CITY-ST-ZIP **WEST PALM BEACH FL**

TITLE  DELETE

NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE  Change  Addition

1.2 NAME  
 1.3 STREET ADDRESS  
 1.4 CITY-ST-ZIP

2.1 TITLE  Change  Addition

2.2 NAME  
 2.3 STREET ADDRESS  
 2.4 CITY-ST-ZIP

3.1 TITLE  Change  Addition

3.2 NAME **PD  
 Williams, Michael**  
 3.3 STREET ADDRESS **4852-B Orleans Ct.**  
 3.4 CITY-ST-ZIP **W. Palm Beach, FLA 33415**

4.1 TITLE  Change  Addition

4.2 NAME **BMD  
 Gordon Santos**  
 4.3 STREET ADDRESS **1900 N. Congress Ave**  
 4.4 CITY-ST-ZIP **West Palm Beach, FLA**

5.1 TITLE  Change  Addition

5.2 NAME **Tr D  
 Titus Rich**  
 5.3 STREET ADDRESS **617 South Mangonia Circle**  
 5.4 CITY-ST-ZIP **West Palm Beach, FLA 33401**

6.1 TITLE  Change  Addition

6.2 NAME **SD  
 Paul Blockson**  
 6.3 STREET ADDRESS **1802 Pierce Drive**  
 6.4 CITY-ST-ZIP **Lake Worth, FLA. 33460**

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Michael Williams*  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Feb. 26, 1999 (561) 683-2197  
 Date Daytime Phone #

CR2E037 (11/98)