


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 31, 2006 08:00 AM
Secretary of State

DOCUMENT # 844078
 1. Entity Name
COULTER ENGINEERS, INC.



Principal Place of Business
 730 E. RAILROAD AVE.
 BRYN MAWR, PA 19010

Mailing Address
 730 E. RAILROAD AVE.
 BRYN MAWR, PA 19010



01252006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 23-2050842	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BLANTON, EDWIN F
825 THOMASVILLE ROAD
TALLAHASSEE, FL 32303

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

1100000409153
 02/08/06-80090-001 150.00

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD FORD, ROBERT 1264 ROUND HILL RD. BRYN MAWR, PA
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD FORD, SHELBY 1264 ROUND HILL RD. BRYN MAWR, PA
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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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, with all other like empowered.

SIGNATURE: _____ *Pres* **1/25/06** **610-536-0100**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #