## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000092664

Entity Name: COATE OF ARMS, INC.

FILED Jan 14, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

16251 SLATER ROAD 16251 SLATER ROAD

UNIT #7 UNIT #7

NORTH FORT MYERS, FL 339173072 US NORTH FORT MYERS, FL 33917 US

Current Mailing Address: New Mailing Address:

1314 CAPE CORAL PARKWAY 16251 SLATER ROAD

SUITE 207 UNIT #7

CAPE CORAL, FL 339049643 US NORTH FORT MYERS, FL 33917 US

FEI Number: 20-3154687 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

COATE, SEAN
16251 SLATER ROAD
UNIT # 7

COATE, SEAN
16251 SLATER ROAD
UNIT # 7

NORTH FORT MYERS, FL 339173072 US NORTH FORT MYERS, FL 33917 US

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: SEAN W, COATE 01/14/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP ( ) Delete Title: DPT (X) Change ( ) Addition

Name: COATE, DONALD E Name: COATE, SEAN W

 Address:
 16251 SLATER ROAD, UNIT # 7
 Address:
 16251 SLATER ROAD, UNIT # 7

 City-St-Zip:
 NORTH FORT MYERS, FL 339173072 US
 City-St-Zip:
 NORTH FORT MYERS, FL 33917 US

Name: COATE, SEAN E Name: COATE, DONALD E

 Address:
 16251 SLATER ROAD, UNIT # 7
 Address:
 16251 SLATER ROAD, UNIT # 7

 City-St-Zip:
 NORTH FORT MYERS, FL 339173072 US
 City-St-Zip:
 NORTH FORT MYERS, FL 33917 US

Title: ST () Delete Title: S (X) Change () Addition

Name: COATE, SANDRA Name: COATE, KIMBERLY D

Address: 16251 SLATER ROAD, UNIT # 7 Address: 16251 SLATER ROAD, UNIT # 7 City-St-Zip: NORTH FORT MYERS, FL 339173072 US City-St-Zip: NORTH FORT MYERS, FL 33917 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: SEAN W. COATE PRES 01/14/2008