## **2005 FOR PROFIT CORPORATION ANNUAL REPORT**

## Apr 11, 2005 8:00 am Secretary of State 04-11-2005 90185 047 \*\*\*150.00 DOCUMENT # F03000000440 1. Entity Name COACH-NET MOTOR CLUB, INC. 20036404 Principal Place of Business Mailing Address 900 N. LAKE HAVASU AVE. PO BOX 803249 LAKE HAVASU, AZ 86403 DALLAS, TX 75380 04052005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 46-0517281 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent ... CT CORPORATION SYSTEM DO NOT WRITE 1200 S. PINE ISLAND RD. PLANTATION, FL 33324 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 $\Box$ Trust Fund Contribution. Added to Fees After May 1, 2005 Fee will be \$550.00 10. OFFICERS AND DIRECTORS TIT! F NAME HENRY, STROUP P STREET ADDRESS 900 N. LAKE HAVASU AVE CITY-ST-ZIP LAKE HAVASU CITY, AZ 86403 TITLE JENSEN, JEFFREY J 6500 N. BELT LINE ROAD STREET ADDRESS CITY-ST-ZIP IRVING, TX 75063 TITLE NAME: TREES, SHEILA ... STREET ADDRESS 900 N. LAKE HAVASU AVE. DO NOT WRITE CITY-ST-ZIP LAKE HAVASU, AZ 86403 TITLE DT IN THIS SPACE ANDERSON, PETER R NAME 6500 N. BELT LINE ROAD STREET ADDRESS CITY-ST-ZIP **IRVING, TX 75063** TITLE NAME

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 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 outrustee 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 al

SIGNING OFFICER OR DIRECTOR

STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

**FILED**