

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F17239

FILED
Apr 17, 2006
Secretary of State

Entity Name: COASTLAND AUTO CENTER, INC.

Current Principal Place of Business:

5939 SHIRLEY ST.
NAPLES, FL 34109 US

New Principal Place of Business:

3771 15TH AVENUE SW
NAPLES, FL 34117 US

Current Mailing Address:

5939 SHIRLEY ST.
NAPLES, FL 34109 US

New Mailing Address:

3771 15TH AVENUE SW
NAPLES, FL 34117 US

FEI Number: 59-2270350

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MACFARLANE, STEWART
735 BELAIR CT
NAPLES, FL 34103 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: DP () Delete
Name: MACFARLANE, STEWART,
Address: 735 BELAIR CT
City-St-Zip: NAPLES, FL 34103

Title: D () Delete
Name: MACFARLANE, MARY E,
Address: 735 BELAIR CT
City-St-Zip: NAPLES, FL 34103

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: T () Change (X) Addition
Name: KIRBY, BOBBY J JR
Address: 3771 15TH AVENUE SW
City-St-Zip: NAPLES, FL 34117 US

I hereby certify that the information supplied with this filing does not qualify for the 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: STEWART MACFARLANE

DP

04/17/2006

Electronic Signature of Signing Officer or Director

Date