

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F50785

FILED  
Apr 30, 2005  
Secretary of State

Entity Name: FIRST CLASS COACH & EQUIPMENT, INC.

## Current Principal Place of Business:

88 E BROAD SAT  
WINTER GARDEN, FL 34787

## New Principal Place of Business:

## Current Mailing Address:

88 E BROAD SAT  
WINTER GARDEN, FL 34787

## New Mailing Address:

FEI Number: 59-2139722

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FEWELL, SCOTT T.  
88 E BROAD ST  
WINTER GARDEN, FL 34787 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: CEO ( ) Delete  
Name: FEWELL, SCOTT T  
Address: 10844 BAYSHORE DRIVE  
City-St-Zip: WINDERMERE, FL 34786

Title: P ( ) Delete  
Name: BAY, JAMES D  
Address: 10812 VERSAILLES  
City-St-Zip: CLERMONT, FL 34711

Title: VP ( ) Delete  
Name: CHAPMAN, TOD  
Address: 17301 SUMMER OAK LANE  
City-St-Zip: CLERMONT, FL 34711

Title: VP ( ) Delete  
Name: OBERT, RONALD K  
Address: 2364 BARONSMEADE CT  
City-St-Zip: WINTER GARDEN, FL 34787

Title: ST ( ) Delete  
Name: FEWELL-BEEBE, KAREN  
Address: 1923 PRINCESS COURT  
City-St-Zip: NAPLES, FL 34110

Title: D ( ) Delete  
Name: FEWELL, SCOTT E  
Address: 212 N HIGHLAND AVE  
City-St-Zip: WINTER GARDEN, FL 34787

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEO (X) Change ( ) Addition  
Name: FEWELL, SCOTT T  
Address: 6124 FOXFIELD COURT  
City-St-Zip: WINDERMERE, FL 34786

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

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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 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: TOD CHAPMAN

VP

04/30/2005

Electronic Signature of Signing Officer or Director

Date