## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F95000005991

Entity Name: COASTAL FIRE PROTECTION, INC.

FILED May 04, 2005 Secretary of State

Current Principal Place of Business:	New Principal Place of Business
Current Finicipal Flace of Business.	New Fillicipal Flace Of Busiliess

8961 NORTH FORK DRIVE NORTH FORT MYERS, FL 33918

Current Mailing Address: New Mailing Address:

PO BX 3437

NORTH FORT MYERS, FL 33918 US

FEI Number: 01-0501835 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

PULIZZI, RICHARD
2704 S.E. 12TH PLACE
CAPE CORAL, FL 33904 US
PULIZZI, RICHARD
8440 AQUA COVE LN.
NORTH FORT MYERS, FL 33903 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: 05/04/2005

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Name:PULIZZI, RICHARDName:PULIZZI, RICHARDAddress:NORTH FORK DR.Address:8961 NORTH FORK DR.

City-St-Zip: NORTH FORT MYERS, FL 33903 City-St-Zip: NORTH FORT MYERS, FL 33903

 Name:
 RODRIGUEZ, LUIS
 Name:
 RODRIGUEZ, LUIS

 Address:
 NORTH FORK DR.
 Address:
 8961 NORTH FORK DR.

City-St-Zip: NORTH FORT MYERS, FL 33903 City-St-Zip: NORTH FORT MYERS, FL 33903

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: RICHARD PULIZZI PRES 05/04/2005