


**2005 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 07, 2005 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # G14175</b> 1. Entity Name COTBY, INC.	
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Principal Place of Business 1824 JACK POINT LN BOCA GRAND, FL 33921 US	Mailing Address PO BOX 926 BOCA GRANDE, FL 33921-0926 US
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03272005 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 59-2226456	Applied For Not Applicable
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5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

**6. Name and Address of Current Registered Agent**

MAGRATTEN, GREGORY  
PARK AVE BOX 926  
BOCA GRANDE, FL, FL 33921

**DO NOT WRITE  
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 \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**10. OFFICERS AND DIRECTORS**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MAGRATTEN, GREG J P.O. BOX 926 BOCA GRANDE, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S BROOKS, MAGRATTEN PO BOX 926 BOCA GRANDE, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP MAGRATTEN, DOROTHY P.O. 926 BOCA GRANDE, FL 33921
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04/07/05-80002-003 150.00

**DO NOT WRITE  
IN THIS SPACE**

12. 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 or trustee 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 attachment with an address, with all other like empowered.

**SIGNATURE:**

*Greg J. Magratten* - GREG J. MAGRATTEN 04/

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #