

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G70523

FILED
Aug 07, 2005
Secretary of State

Entity Name: GULF COAST AERO-SYSTEMS, INC.

Current Principal Place of Business:

1504 GULFVIEW DR
SARASOTA, FL 34236

New Principal Place of Business:

Current Mailing Address:

PO BOX 3739
SARASOTA, FL 34230

New Mailing Address:

FEI Number: 59-2360446

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LINDSAY ROBERT A.
1504 GULF VIEW DR
SARASOTA, FL 34236 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: PST () Delete
Name: LINDSAY, ROBERT A.,
Address: PO BOX 3739
City-St-Zip: SARASOTA, FL 34230

Title: D () Delete
Name: LINDSAY, ROBERT A.,
Address: PO BOX 3739
City-St-Zip: SARASOTA, FL 34230

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: ROBERT A. LINDSAY

PRES

08/07/2005

Electronic Signature of Signing Officer or Director

Date