2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H77322

Address:

City-St-Zip:

2513 NW 15TH AVE

CAPE CORAL, FL 33993

Entity Name: GULF COAST COATINGS, INC

FILED Apr 28, 2005 Secretary of State

| Littley Na | ilie. Ooli o | 0.001 0001 | 11400, 1140. | | | | |
|---|---|--------------------|---------------------|---|--|---|--|
| Current Principal Place of Business: | | | | New Prince | ipal Place | of Business: | |
| | NGE GROVE ORT MYERS, | | | | | | |
| Current Mailing Address: | | | | New Mailing Address: | | | |
| | NGE GROVE ORT MYERS, | | | | | | |
| FEI Number: 59-2593777 FEI Number Applied For () | | | FEI Number Not App | licable () | Certificate of Status Desired (X) | | |
| Name and | l Address of | Current Reg | jistered Agent: | Name and | Name and Address of New Registered Agent: | | |
| 4326 ORA | E, MICHAEL W NGE GROVE ORT MYERS, | BLVD. | US | | | | |
| | named entity e of Florida. | submits this | statement for the p | urpose of changing i | ts registere | ed office or registered agent, or both, | |
| SIGNATU | RE: | | | | | | |
| | Electro | nic Signatur | e of Registered Age | nt | | Date | |
| Election Car | mpaign Financir | ng Trust Fund | Contribution (). | | | | |
| OFFICERS AND DIRECTORS: | | | | ADDITION | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | | |
| Title: Name: Address: City-St-Zip: | CARLISLE, M | E GROVE BLVI |) | Title: Name: Address: City-St-Zip: | | () Change () Addition | |
| Title: Name: | VP (CARLISLE, D |) Delete ANNY D | | Title: Name: | VP CARLISLE. | (X) Change()Addition , DANNY D | |

Address:

City-St-Zip:

2618 NW 3RD AVE

CAPE CORAL, FL 33909

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: MICHAEL W CARLISLE SR. P 04/28/2005