

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000014048

FILED
Jul 08, 2005
Secretary of State

Entity Name: FIRST COAST OF AUGUSTA, INC.

Current Principal Place of Business:

105 CANNON CT
PONTE VEDRA BEACH, FL 32082

New Principal Place of Business:

Current Mailing Address:

105 CANNON CT
PONTE VEDRA BEACH, FL 32082

New Mailing Address:

FEI Number: 59-3635306

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ATTINGER, SKIP
105 CANNON CT W
PONTE VEDRA BEACH, FL 32082 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

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:

Title: D () Delete
Name: BEAVEN, SMITH
Address: 1644 DUKE OF WINDSOR ROAD
City-St-Zip: VIRGINIA BEACH, VA 23454

Title: D () Delete
Name: BARLI, PAUL
Address: 7028 DALLAS ROAD
City-St-Zip: BROOKLYN CENTER, MN 55430

Title: D () Delete
Name: DOSTER, RICHARD
Address: 8900 SW 125TH TERRACE
City-St-Zip: MIAMI, FL 33176

Title: D () Delete
Name: SHLEMON, STEVE
Address: 4202 W SWANN AVENUE
City-St-Zip: TAMPA, FL 33609

Title: D () Delete
Name: FAILES, JOHN
Address: 302 PARK AVENUE
City-St-Zip: PORTSMOUTH, VA 23707

Title: D () Delete
Name: SINK, RIDGE
Address: 8160 BAY MEADOWS WAY W, STE. 110
City-St-Zip: JACKSONVILLE, FL 32256

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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:

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: BEAVEN SMITH

D

07/08/2005

Electronic Signature of Signing Officer or Director

Date