

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000082818

FILED
Feb 01, 2005
Secretary of State

Entity Name: INTRACOASTAL MANAGEMENT SERVICES, INC.

Current Principal Place of Business:

12871 LA ROCHELLE CIRCLE
PALM BEACH GARDENS, FL 33410

New Principal Place of Business:

Current Mailing Address:

P O BOX 2595
ORMOND BEACH, FL 32175

New Mailing Address:

FEI Number: 65-1037840

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FLEMING, HAROLD V
810 SATURN ST, SUITE 24
JUPITER, FL 33477 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: PD () Delete
Name: RICE, TOM SR
Address: 12871 LA ROCHELLE CIRCLE
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: STD () Delete
Name: HOLDER, JOHN E K
Address: P O BOX 2595
City-St-Zip: ORMOND BEACH, FL 32175

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: JOHN E K HOLDER

STD

02/01/2005

Electronic Signature of Signing Officer or Director

Date