## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## **FILED** Apr 25, 2005 8:00 am Secretary of State **DOCUMENT # P00000094210** 04-25-2005 90278 016 \*\*\*150.00 CORAL COVE DEVELOPMENT, INC. Principal Place of Business Mailing Address P.O. BOX 1 5800 GASPARILLA RD, #B-1 BOCA GRANDE, FL 33921 PLACIDA, FL 33946 2. Principal Place of Business 3. Mailing Address 5718 WESTHEIMEN Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E034 (10/03) 04182005 Chg-P SulsE City & State City & State 4. FEI Number Applied For 65-1045944 Not Applicable Zio Country \$8.75 Additional Country 5. Certificate of Status Desired 7057 Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent WHITE, HAROLD C Street Address (P.O. Box Number is Not Acceptable) PO BOX 667 137 BONO STREET CLEWISTON, FL 33440 Zip Code City 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 9. Election Campaign Financing **\$5.00** May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2005 Fee will be \$550.00 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. OFFICERS AND DIRECTORS 11. D ☐ Addition TITLE TITLE ☐ Change ☐ Delete NAME IGLESIA, ROBERTO J NAME STREET ADDRESS 5718 WESTHEIMER RD, STE 1806 STREET ADDRESS HOUSTON, TX 77057 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE PRESIDENT Change ☐ Addition THURNTON, JOHN P. THORNTON, JACK NAME NAME 5718 WESTHEINEN, STE 1806 STREET ADDRESS 5718 WESTHEIMER RD, STE 1806 STREET ADDRESS CITY-ST-ZIP CITY-ST-71P HOUSTON, TX 77057 TX 77057 ☐ Delete TITLE ☐ Change ☐ Addition TITLE ABELLO, CARLOS STREET ADDRESS 5718 WESTHEIMER RD, STE 1806 STREET ADDRESS CRY-ST-71P CITY-ST-7IP HOUSTON, TX 77057 TITLE TITLE ☐ Delete ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE Change Addition ☐ Defete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition TITLE ☐ Delete TITLE NAME NAME

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 the empowered.

CITY-ST-ZIP

STREET ADDRESS

0 SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME

STREET ADDRESS CITY-ST-ZIP

day Jack THONNOW

7/3-977-5718

Oavtime Phone #