2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000118658

FILED Aug 26, 2005 Secretary of State

Entity Name: PREMIER GULF COAST PROPERTIES, INC.

Current Principal Place of Business:		New Principal Place of Business:		
1185 IMMO SUITE 110 NAPLES, I				
Current Mailing Address:		New Mailing Address:		
P.O. BOX NAPLES, I				
FEI Number	: 68-0488920	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and Address of Current Registered Agent:		Name and Address o	Name and Address of New Registered Agent:	
COX, JOE				
1185 IMM0 SUITE 110 NAPLES, I The above	OKALEE RD.) FL 34110 US named entity		ourpose of changing its registered	d office or registered agent, or both,
1185 IMM0 SUITE 110 NAPLES, I The above	OKALEE RD.) FL 34110 US		ourpose of changing its registered	d office or registered agent, or both,
1185 IMM0 SUITE 110 NAPLES, I The above	OKALEE RD.) FL 34110 US e named entity e of Florida. RE:	submits this statement for the p		
1185 IMM0 SUITE 110 NAPLES, I The above n the State SIGNATUI n accordan	OKALEE RD.) FL 34110 US e named entity e of Florida. RE: Electro ce with s. 607.19		ent	d office or registered agent, or both, Date
1185 IMM0 SUITE 110 NAPLES, I The above n the State SIGNATUI n accordan Election Cai	OKALEE RD.) FL 34110 US e named entity e of Florida. RE: Electro ce with s. 607.19	submits this statement for the particles of Registered Agraga(2)(b), F.S., the corporation did not g Trust Fund Contribution ().	ent ot receive the prior notice.	
1185 IMM0 SUITE 110 NAPLES, I The above n the State SIGNATUI n accordan Election Cai	OKALEE RD.) FL 34110 US e named entity e of Florida. RE: Electro ce with s. 607.19 mpaign Financin S AND DIREC	submits this statement for the price Signature of Registered Agrand (2)(b), F.S., the corporation did not get Trust Fund Contribution (1). CTORS: Delete LEE RD.	ent ot receive the prior notice.	Date

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: GARY DAVIS P 08/26/2005