2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000033245

Entity Name: TECHCOACH, INC

FILED Jul 07, 2004 Secretary of State

Current Principal Place of Business:

New Principal Place of Business:

3331 ROYAL ASCOT RUN

3331 ROYAL ASCOT RUN GOTHA, FL 34734

GOTHA, FL. 34734

Current Mailing Address:

New Mailing Address:

P.O. BOX 901 GOTHA, FL. 34734 P.O. BOX 901 GOTHA, FL 34734

FEI Number: 26-0008983

Certificate of Status Desired ()

FEI Number Applied For () FEI Number Not Applicable ()

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

HARRINGTON, ROBERT 3331 ROYAL ASCOT RUN GOTHA, FL. 34734

3331 ROYAL ÁSCOT RUN

TECHCOACH, INC GOTHA, FL 34734

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: ROBERT R HARRINGTON

07/07/2004

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition

Title:

PD () Delete HARRINGTON, ROBERT

Name:

Address:

3331 ROYAL ASCOT RUN

City-St-Zip:

GOTHA, FL. 34734

Title: Name: () Delete

Address: City-St-Zip: HARRINGTON, ROBERT 3331 ROYAL ASCOT RUN

GOTHA, FL. 34734

Address: 3331 ROYAL ASCOT RUN City-St-Zip: GOTHA, FL 34734

SD

(X) Change () Addition

Name: Address:

HARRINGTON, KIM 3331 ROYAL ASCOT RUN

City-St-Zip:

Title:

Name:

Title:

GOTHA, FL 34734

HARRINGTON, ROBERT

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 Statutés. 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: ROBERT R HARRINGTON Electronic Signature of Signing Officer or Director PD

07/07/2004

Date