2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2005
Secretary of State

DOCUMENT# P02000056405

Entity Name: 1ST COAST SAFETY CONSULTANTS, INC.

Current Principal Place of Business:

31 OCEAN PINES DR
ST AUGUSTINE, FL 320806383

New Principal Place of Business:

135 SPARTINA AVENUE
ST AUGUSTINE, FL 320805389

Current Mailing Address:

31 OCEAN PINES DR
ST AUGUSTINE, FL 320806383

New Mailing Address:

135 SPARTINA AVENUE
ST AUGUSTINE, FL 320805389

FEI Number: 02-0602853 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

UPCHURCH, JR.,, H. DAVIS ESQUIRE
UPCHURCH & ESPOSITO, P.A.
1510 N PONCE DE LEON
ST AUGUSTINE, FL 32084 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: DP ( ) Delete
Name: BIRKHIMER, KARL M
Address: 31 OCEAN PINES DR
City-St-Zip: ST AUGUSTINE, FL 320806383

Title: DS ( ) Delete
Name: BIRKHIMER, CHERYL A
Address: 31 OCEAN PINES DR
City-St-Zip: ST AUGUSTINE, FL 320806383

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition
Name: BIRKHIMER, KARL M
Address: 135 SPARTINA AVENUE
City-St-Zip: ST AUGUSTINE, FL 320805389

Title: DS (X) Change ( ) Addition
Name: BIRKHIMER, CHERYL A
Address: 135 SPARTINA AVENUE
City-St-Zip: ST AUGUSTINE, FL 320805389

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: KARL M. BIRKHIMER DP 04/26/2005

Electronic Signature of Signing Officer or Director — Date