

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000113476

FILED
Mar 02, 2004
Secretary of State

Entity Name: GULFCOAST GEOTECHNICAL SERVICES, INC.

Current Principal Place of Business:

18099 BRADETTE AVE.
PORT CHARLOTTE, FL 33954

New Principal Place of Business:

18099 BREDETTE AVE.
PORT CHARLOTTE, FL 33954

Current Mailing Address:

18099 BRADETTE AVE.
PORT CHARLOTTE, FL 33954

New Mailing Address:

18099 BREDETTE AVE.
PORT CHARLOTTE, FL 33954

FEI Number: 47-0892476

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COLLEEN, JON M
18099 BRADETTE AVE.
PORT CHARLOTTE, FL 33954

Name and Address of New Registered Agent:

COLLEEN, JON M
18099 BREDETTE AVE.
PORT CHARLOTTE, FL 33954

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: JON M. COLLEEN

03/02/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSD () Delete
Name: COLLEEN, JON M
Address: 18099 BRADETTE AVE.
City-St-Zip: PORT CHARLOTTE, FL 33954

Title: VTD () Delete
Name: COLLEEN, BETH
Address: 18099 BRADETTE AVE.
City-St-Zip: PORT CHARLOTTE, FL 33954

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change () Addition
Name: COLLEEN, JON M
Address: 18099 BREDETTE AVE.
City-St-Zip: PORT CHARLOTTE, FL 33954

Title: VTD (X) Change () Addition
Name: COLLEEN, BETH
Address: 18099 BREDETTE AVE.
City-St-Zip: PORT CHARLOTTE, FL 33954

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: JON M. COLLEEN

PSD

03/02/2004

Electronic Signature of Signing Officer or Director

Date