

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT****FILED****Apr 23, 2004 08:00
Secretary of Stat**

DOCUMENT # P02000120143 1. Entity Name COFFS HARBOUR, INC.			
Principal Place of Business 9 SW 13TH STREET FORT LAUDERDALE, FL 33315		Mailing Address 9 SW 13TH STREET FORT LAUDERDALE, FL 33315	
DO NOT WRITE IN THIS SPACE			
2. Name and Address of Current Registered Agent JOHNSON, SEAN 9 SW 13TH STREET FORT LAUDERDALE, FL 33315			
3. 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 _____ DATE _____ (Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering))			
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		4. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		U000000127587 04/26/04-80005-008 150.00	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	PD TAYLOR, RODD 841 SW 19TH STREET FT. LAUDERDALE, FL 33315		
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	VD TAYLOR, KELLY 841 SW 19TH STREET FT. LAUDERDALE, FL 33315		
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 like empowered.			
SIGNATURE:		03/15 Date Daytime Phone #	