

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000112013

FILED
Jul 14, 2007
Secretary of State

Entity Name: ROBERT COE SERVICES, INC.

Current Principal Place of Business:

4001 SADDLECLUB DRIVE
NEW SYMRNA BEACH, FL 32168 US

New Principal Place of Business:

185 LONDON DRIVE
PALM COAST, FL 32137 US

Current Mailing Address:

4001 SADDLECLUB DRIVE
NEW SYMRNA BEACH, FL 32168

New Mailing Address:

185 LONDON DRIVE
PALM COAST, FL 32137

FEI Number: 30-0208127

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COE, ROBERT J
4001 SADDLECLUB DRIVE
NEW SYMRNA BEACH, FL 32168 US

Name and Address of New Registered Agent:

COE, ROBERT J
185 LONDON DRIVE
PALM COAST, FL 32137 US

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 J COE

07/14/2007

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:

Title: P () Delete
Name: COE, ROBERT J
Address: 4001 SADDLECLUB DRIVE
City-St-Zip: NEW SYMRNA BEACH, FL 32168

Title: V () Delete
Name: COE, ANDREA M
Address: 4001 SADDLECLUB DRIVE
City-St-Zip: NEW SYMRNA BEACH, FL 32168

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: COE, ROBERT J
Address: 185 LONDON DRIVE
City-St-Zip: PALM COAST, FL 32137 US

Title: V (X) Change () Addition
Name: COE, ANDREA M
Address: 185 LONDON DRIVE
City-St-Zip: PALM COAST, FL 32137 US

Title: T () Change (X) Addition
Name: DAVIDSON, MATTHEW
Address: 185 LONDON DRIVE
City-St-Zip: PALM COAST, FL 32137 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: MATTHEW DAVIDSON

T

07/14/2007

Electronic Signature of Signing Officer or Director

Date