2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000092119

Entity Name: GY OF PALM COAST, INC.

FILED May 02, 2005 Secretary of State

Littly Nai	ile. Grorra	REIVI COAST, IIVC.					
Current P	rincipal Place	of Business:	New Prince	New Principal Place of Business:			
1420 N TOMOKA FARMS RD DAYTONA BCH, FL 32124				1150 PALM COAST PARKWAY PALM COAST, FL 32137			
Current M	ailing Addres	s:	New Maili	New Mailing Address:			
	MOKA FARMS BCH, FL 3212		SUITE P-4	515 N. FLAGLER DR. SUITE P-400 WEST PALM BEACH, FL 33401			
FEI Number:	20-1255274	FEI Number Applied For ()	FEI Number Not App	licable ()	Certificate of Status De	sired ()	
Name and	Address of C	urrent Registered Agent:	Name and	Name and Address of New Registered Agent:			
	S, GARY MOKA FARMS BCH, FL 3212		SUITE P-4	AMSI 515 N. FLAGLER DR. SUITE P-400 WEST PALM BEACH, FL 33401 US			
	named entity s of Florida.	ubmits this statement for the p	urpose of changing i	ts registered o	office or registered age	∍nt, or both,	
SIGNATUR	RE: JOHN LA	CY		05/02/2005			
	Electron	ic Signature of Registered Age	nt		Date		
Election Car		8(2)(b), F.S., the corporation did not Trust Fund Contribution(). 「ORS:	•		TO OFFICERS AND	DIRECTORS:	
Title: Name: Address: City-St-Zip:	D () YEOMANS, GAF 1420 N TOMOK DAYTONA BCH	A FARMS RD	Title: Name: Address: City-St-Zip:	()) Change () Addition		
Title: Name: Address: City-St-Zip:	D () LIRA, CARLOS 1420 N TOMOK DAYTONA BCH		Title: Name: Address: City-St-Zip:	LIRA, CARLOS	DAST PARKWAY		
Title: Name: Address: City-St-Zip:	()	Delete	Title: Name: Address: City-St-Zip:	LACY, JOHN 515 N. FLAGLE) Change (X) Addition ER DR. STE. P-400 BEACH, FL 33401		

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: GARY YEOMANS D 05/02/2005