

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000096228

Entity Name: GULFCOAST LIMOUSINES, INC.

FILED  
Apr 28, 2005  
Secretary of State

## Current Principal Place of Business:

9070 SPRING RUN BLVD  
UNIT 106  
BONITA SPRINGS, FL 34135

## Current Mailing Address:

PO BOX 151732  
CAPE CORAL, FL 33915

## New Principal Place of Business:

2323 DEL PRADO BLVD  
SUITE 7-146  
CAPE CORAL, FL 33990

## New Mailing Address:

2323 DEL PRADO BLVD  
SUITE 7-146  
CAPE CORAL, FL 33990

FEI Number: 20-1286484

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BOYLE, JAMES S  
1103 SW 18TH AVE  
CAPE CORAL, FL 33991 US

## Name and Address of New Registered Agent:

BOYLE, JAMES S  
2323 DEL PRADO BLVD  
SUITE 7-146  
CAPE CORAL, FL 33990 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:

04/28/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: BOYLE, JAMES S  
Address: 1103 SW 18TH AVE  
City-St-Zip: CAPE CORAL, FL 33991

Title: VP ( ) Delete  
Name: THOMPSON, RICHARD B  
Address: 9070 SPRING RUN BLVD, UNIT 106  
City-St-Zip: BONITA SPRINGS, FL 34135

Title: TRE (X) Delete  
Name: BOYLE, ALETHEA L  
Address: 1103 SW 18TH AVE  
City-St-Zip: CAPE CORAL, FL 33991

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: BOYLE, JAMES S  
Address: 2323 DEL PRADO BLVD 7-146  
City-St-Zip: CAPE CORAL, FL 33990

Title: VP (X) Change ( ) Addition  
Name: BOYLE, ALETHEA L  
Address: 2323 DEL PRADO BLVD 7-146  
City-St-Zip: CAPE CORAL, FL 33990

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: JAMES S BOYLE

PRES

04/28/2005

Electronic Signature of Signing Officer or Director

Date