

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000109021

FILED  
Sep 06, 2005  
Secretary of State

Entity Name: SOUTHERN COAST SERVICES, INC.

## Current Principal Place of Business:

5640 SW 111TH TERRACE  
FT. LAUDERDALE, FL 33328 US

## New Principal Place of Business:

2269 SOUTH UNIVERSITY DRIVE  
#152  
DAVIE, FL 33324 US

## Current Mailing Address:

5640 SW 111TH TERRACE  
FT. LAUDERDALE, FL 33328 US

## New Mailing Address:

2269 SOUTH UNIVERSITY DRIVE  
#152  
DAVIE, FL 33324 US

FEI Number: 80-0115467

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WALDREP, GARY O  
5640 SW 111TH TERRACE  
FT. LAUDERDALE, FL 33328 US

## Name and Address of New Registered Agent:

WALDREP, GARY O  
2269 SOUTH UNIVERSITY DRIVE  
#152  
DAVIE, FL 33324 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: GARY WALDREP

09/06/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: WALDREP, GARY O  
Address: 5640 SW 111TH TERRACE  
City-St-Zip: FT. LAUDERDALE, FL 33327 US

Title: SEC ( ) Delete  
Name: WALDREP, DONNA R  
Address: 5640 SW 111TH TERRACE  
City-St-Zip: FT. LAUDERDALE, FL 33328 US

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

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: WALDREP, GARY O  
Address: 2269 SOUTH UNIVERSITY DRIVE, #152  
City-St-Zip: DAVIE, FL 33324 US

Title: VP (X) Change ( ) Addition  
Name: WALDREP, DONNA R  
Address: 2269 SOUTH UNIVERSITY DRIVE, #152  
City-St-Zip: DAVIE, FL 33324 US

Title: ST ( ) Change (X) Addition  
Name: WALDREP, JR., GARY O  
Address: 2269 SOUTH UNIVERSITY DRIVE, #152  
City-St-Zip: DAVIE, FL 33324 US

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 WALDREP

P

09/06/2005

Electronic Signature of Signing Officer or Director

Date