

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000153472

FILED  
Aug 14, 2005  
Secretary of State

Entity Name: BEST FENCE ON NATURE COAST INC.

**Current Principal Place of Business:**

8646 ROSEANN BLVD  
NEW PORT RICHEY, FL 34654 US

**New Principal Place of Business:**

**Current Mailing Address:**

8646 ROSEANN BLVD  
NEW PORT RICHEY, FL 34654 US

**New Mailing Address:**

FEI Number: 20-1923094

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CATELLIER, LEONARD  
8646 ROSEANN BLVD  
NEW PORT RICHEY, FL 34654 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: DIR ( ) Delete  
Name: CATELLIER, MARC A  
Address: 7001 BROAD ST  
City-St-Zip: NEW PORT RICHEY, FL 34654 US

Title: DIR ( ) Delete  
Name: CATELLIER, MATHEW  
Address: 8646 ROSEANN BLVD  
City-St-Zip: NEW PORT RICHEY, FL 34654 US

Title: DIR ( ) Delete  
Name: CATELLIER, RICHARD D  
Address: 8646 ROSEANN BLVD  
City-St-Zip: NEW PORT RICHEY, FL 34654 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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: MATT CATELLIER

DIRE

08/14/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date