

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000162262

**FILED**  
**Jul 13, 2005**  
**Secretary of State**

**Entity Name:** COFFEY ENTERPRISE GROUP, INC.

**Current Principal Place of Business:**

135 THELMA DR  
ROTONDA WEST, FL 33947

**New Principal Place of Business:**

2960 S MCCALL RD  
SUITE 208  
ENGLEWOOD, FL 34224

**Current Mailing Address:**

135 THELMA DR  
ROTONDA WEST, FL 33947

**New Mailing Address:**

2960 S MCCALL RD  
SUITE 208  
ENGLEWOOD, FL 34224

**FEI Number:** 20-1976667

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

COFFEY, CHRISTOPHER  
135 THELMA DR  
ROTONDA WEST, FL 33947 US

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

COFFEY, CHRISTOPHER  
2960 S MCCALL RD  
SUITE 208  
ENGLEWOOD, FL 34224 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:**

07/13/2005

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: PS ( ) Delete  
Name: COFFEY, CHRISTOPHER  
Address: 135 THELMA DR  
City-St-Zip: ROTONDA WEST, FL 33947

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

Title: PS (X) Change ( ) Addition  
Name: COFFEY, CHRISTOPHER  
Address: 2960 S MCCALL RD  
City-St-Zip: ENGLEWOOD, FL 34224

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:** CHRISTOPHER COFFEY

PS

07/13/2005

Electronic Signature of Signing Officer or Director

Date