## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000092664

Entity Name: COATE OF ARMS, INC.

FILED Mar 19, 2006 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

16251 SLATER RD UNIT 7 16251 SLATER ROAD N FT MYERS, FL 33917

UNIT#7

NORTH FORT MYERS, FL 339176633 US

**Current Mailing Address:** New Mailing Address:

16251 SLATER ROAD 16251 SLATER RD UNIT 7

N FT MYERS, FL 33917 UNIT#7

NORTH FORT MYERS, FL 339176633 US

FEI Number: 20-3154687 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

COATE, DONALD E COATE, DONALD E 16251 SLATER RD UNIT 7 16251 SLATER ROAD

UNIT#7 N FT MYERS, FL 33917

NORTH FORT MYERS, FL 339176633 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: DONALD E. COATE 03/19/2006

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Delete Title: (X) Change ( ) Addition

COATE, DONALD E COATE, DONALD E Name: Name: 16251 SLATER RD UNIT 7 16251 SLATER RD, UNIT# 7 Address: Address:

City-St-Zip: N FT MYERS, FL 33917 City-St-Zip: NORTH FORT MYERS, FL 339176633 US

Title: Title: ( ) Delete (X) Change ( ) Addition

Name: COATE, SEAN E Name: COATE, SEAN E

16251 SLATER RD UNIT 7 16251 SLATER RD UNIT 7 Address: Address:

N FT MYERS, FL 33917 NORTH FORT MYERS, FL 33917 US City-St-Zip: City-St-Zip:

Title: ( ) Delete Title: (X) Change ( ) Addition COATE, SANDRA COATE, SANDRA Name: Name:

16251 SLATER RD UNIT 7 16251 SLATER RD UNIT 7 Address: Address:

City-St-Zip: N FT MYERS, FL 33917 City-St-Zip: NORTH FORT MYERS, FL 33917 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119 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.

Ρ SIGNATURE: DONALD E. COATE 03/19/2006