2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000123133

City-St-Zip:

BONITA SPRINGS, FL 34134

Entity Name: PLATINUM COAST TECHNOLOGY, INC.

FILED Feb 19, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:	
27400 RIV	ERVIEW CEN	ITER BLVD		
SUITE 4				
BONITAS	PRINGS, FL	34134		
Current Mailing Address:			New Mailing Address:	
27400 RIVERVIEW CENTER BLVD				
SUITE 4 BONITA S	PRINGS, FL	34134		
FEI Number	: 20-3412089	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired (X)
Name and	d Address of	Current Registered Agent:	Name and Address of	of New Registered Agent:
	MONTEREY C	OMMONS BLVD JS		
	e named entity e of Florida.	submits this statement for the	purpose of changing its registere	d office or registered agent, or both,
SIGNATU	RE:			
	Electro	nic Signature of Registered Ag	ent	Date
Election Ca	mpaign Financir	g Trust Fund Contribution ().		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title:	Р () Delete	Title:	() Change () Addition
Name:	WOODS, RAY		Name:	() change () / taution
Address:		OOD POINTE TER #204	Address:	
City-St-Zip:	BONITA SPRI	NGS, FL 34135	City-St-Zip:	
Title:	Т () Delete	Title:	() Change () Addition
Name:	WOODS, AKIK	:0 S	Name:	
Address:		OOD POINTE TER #204	Address:	
City-St-Zip:	BONITA SPRIN	NGS, FL 34135	City-St-Zip:	
Title:	S () Delete	Title:	() Change () Addition
Name:	LESTER, LEE	ÁNN	Name:	• • • • • • • • • • • • • • • • • • • •
Address:	27598 RIVER\	IEW CENTER BLVD	Address:	
City-St-Zip:	BONITA SPRIN	IGS, FL 34134	City-St-Zip:	
Title:	D () Delete	Title:	() Change () Addition
Name:	LESTER, DAV	•	Name:	- , ,
Address:	27598 RIVER\	IEW CENTER BLVD	Address:	

I hereby certify that the information supplied with this filing does not qualify 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.

City-St-Zip:

SIGNATURE: RAYMOND WOODS Ρ 02/19/2009