


**2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)**

**FILED**  
**Feb 07, 2005 8:00 am**  
**Secretary of State**

02-07-2005 90068 026 \*\*\*150.00

<b>DOCUMENT # P94000030496</b>			
1. Entity Name <b>RANDY COULTER CONSTRUCTION, INC.</b>			
Principal Place of Business 12306 CLEARLAKE DR NEW PT RICHEY FL 34654		Mailing Address 12306 CLEARLAKE DR NEW PT RICHEY FL 34654	
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

40014100

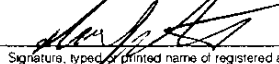


1st MOORE CR2E034 (10/04)

4. FEI Number <b>59-3379385</b>		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75</b> Additional Fee Required	

6. Name and Address of Current Registered Agent <b>COULTER, RANDY T 12306 CLEARLAKE DR NEW PT RICHEY FL 34654</b>		7. Name and Address of New Registered Agent Name <b>RANDY T. COULTER</b> Street Address (P.O. Box Number is Not Acceptable) <b>13114 Flying Squirrel ct HUDSON FL <del>34654</del></b> City <b>FL</b> Zip Code <b>34669</b>	
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE  **RANDY COULTER** DATE **1-25-05**  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2005 Fee Will Be \$550.00</b> <b>Make Check Payable to Florida Department of State</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PST COULTER, RANDY T 7216 BETHESDA COURT WEEKI WACHEE FL 34607</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PST RANDY T. COULTER 13114 Flying Squirrel ct HUDSON FL 34669</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>V COULTER, RYAN THOMAS 7216 BETHESDA COURT WEEKI WACHEE FL 34607</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>RYAN THOMAS COULTER 13114 Flying Squirrel ct HUDSON FL 34669</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  **RANDY COULTER** DATE **1-25-05** DAYTIME PHONE # **7279199335**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR