FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000012415 (1)

COACH GERRY, INC.

Principal Place of Business Mailing Address
4864 ROCKING HORSE LANE 4864 ROCKING H

FILED Apr 15 1998 8:00am Secretary of State



4864 ROCKING HORSE LANE SARASOTA FL 54241		4864 ROCKING HORSE L SARASOTA FL 34241	ANE	20.407.67	NO 65 4 05	
				DO NOT WRITE IN TH	IIS SPACE	
				3. Date Incorporated or Qualified 02/05/1996		
2. Principal Place of Business 2		2a. Mailing Address	·	4. FEI Number	Applied For	
21		26		65-0639379	Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			\$8.75 Additional	
22		27		5. Certificate of Status Desired	Fee Required	
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be	
23 Zip	Country	Z ip	Country	Trust Fund Contribution	Added to Fees	
24	25	29	30	 This corporation owes or has paid the Personal Property Tax due June 30. 	Yes No	
9. Name and Address of Current Registered Agent			30	10. Name and Address of New Register		
WA	ARREN, GERRY		81 Name			
4864 ROCKING HORSE LANE			82 Street Add	Idress (P.O. Box Number is Not Acceptable)		
SARASOTA FL 34241						
			83		ļ	
			84 City		85 Zip Code	
11. Pursuant I	to the provisions of Sections 607.0	0502 and 607.1508, Florida Statute	es, the above-named co	orporation submits this statement for the purpose	e of changing its registered	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.						
SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE						
12.		AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A		
TITLE	D	☐ DELETE	1.1 TITLE	100110,0111102010 0111021101	Change Addition	
NAME	WARREN, GERRY		1.2 NAME			
STREET ADDRESS	4864 ROCKING HORSE LA	WE	1.3 STREET ADDRESS			
CITY-ST-ZIP	SARASOTA FL 34241		1.4 CITY-ST-ZIP			
TITLE		☐ DELETE	2.1 TITLE		Change Addition	
NAME			2.2 NAME			
STREET ADDRESS			2.3 STREE1 ADDRESS			
CITY-ST-ZIP			2.4 CITY-ST-ZIP			
TITLE		☐ DELETE	3.1 TITLE		Change Addition	
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREET ADDRESS			
CITY-ST-ZIP		DELETE	3.4. CITY-ST-ZiP		Change Addition	
TITLE	** *** ** ** **	. LJ ULLEIE	4.1 TIFLE		The Principle The Modition	
NAME STREET ADDRESS			4. 2 NAME 4.3 STREET ADDRESS			
CITY-ST-ZIP			4.3 STREET ADDRESS			
TITLE		DELETE	5.1 TITLE		☐ Change ☐ Addition	
NAME .		 -	5.2 NAME		- · - · · ·	
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP			5 4 City-ST-ZIP			
TITLE	·	DELETE	6.1 TITLE		Change Addition	
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			
CITY_CT_7IP			SACITY OT 7ID			

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

4.000