2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 18, 2007
Secretary of State

DOCUMENT# P96000099939

Entity Name: COLTMAN, INC.

Current Principal Place of Business:

4255 TAMIAMI TRAIL N
NAPLES, FL 34103 US

New Principal Place of Business:

Current Mailing Address:

5215 OLD GALLOWS WAY
NAPLES, FL 34105 US

New Mailing Address:

FEI Number: 59-3434853 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

D'AGOSTINO, LOUIS D
821 FIFTH AVE., SOUTH
STE 201
NAPLES, FL 34103 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: C ( ) Delete
Name: FRANK D'AGOSTINO,
Address: 5215 OLD GALLOWS WAY
City-St-Zip: NAPLES, FL 34105

Title: P ( ) Delete
Name: DOMENIC D'AGOSTINO,
Address: 5215 OLD GALLOWS WAY
City-St-Zip: NAPLES, FL 34105

Title: VP ( ) Delete
Name: JOHN D'AGOSTINO,
Address: 7834 GARDNER DR #201
City-St-Zip: NAPLES, FL 34109

Title: S ( ) Delete
Name: ANNE D'AGOSTINO,
Address: 5215 OLD GALLOWS WAY
City-St-Zip: NAPLES, FL 34105

Title: T ( ) Delete
Name: MARIO D'AGOSTINO,
Address: 2215 HAWKS RIDGE DR #805
City-St-Zip: NAPLES, FL 34105

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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.

SIGNATURE: ANNE D'AGOSTINO S 01/18/2007

Electronic Signature of Signing Officer or Director — Date