2005 FOR PROFIT CORPORATION **ANNUAL REPORT**

changed, or on an attachment with

SIGNATURE:

FILED May 09, 2005 08:00 AM Secretary of State DOCUMENT # P97000025772 1. Entity Name COFFEY & COMPANY, INC. Principal Place of Business Mailing Address 2004 PRINCE DR 975 IMPERIAL GOLF COURSE BLVD NAPLES, FL 34110 NAPLES, FL 34110 05052005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3489586 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent HOLLANDER, RHONDA P.A. DO NOT WRITE 1861 NORTH FEDERAL HIGHWAY, #191 HOLLYWOOD, FL 33020 IN THIS SPACE 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 \$5.00 May Be In accordance with s. 607.193(2)(b), F.S., the Trust Fund Contribution. Added to Fees corporation did not receive the prior notice. Due by September 7, 2005 OFFICERS AND DIRECTORS 10. PSD TITLE NAME COFFEY, MICHAEL STREET ADDRESS 2004 PRINCE DR CITY -ST-ZIP NAPLES, FL 34110 VPTD U00000364931 05/09/05-80015-018 150.00 YOUNG, LYNETTE NAME 2004 PRINCE DR STREET ADDRESS CITY ST-ZIP NAPLES, FL 34110 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling 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