2006 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # P99000050392

1. Entity Name
GULF COAST AUTO WORKS CORPORATION

Principal Place of Business	Mailing Address
4249 CLARK ROAD	4249 CLARK ROAD
SARASOTA, FL 34233	SARASOTA, FL 34233

DO NOT WRITE IN THIS SPACE

05022006   No Chg-P   CR2E034 (11/05)

4. FEI Number	Applied For
65-0932529	Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

MCGINN, BRIAN
2018 OAK TR SUITE 102
CENTURY SMALL BUSINESS
SARASOTA, FL 34231

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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 _____

Signature, typed or printed name of registered agent and title if applicable   (NOTE: Registered Agent signature required when reinstating)   DATE

FILE NOW!!! FEE IS $550.00
Due by September 6, 2006

9. Election Campaign Financing Trust Fund Contribution. ☐   **$5.00** May Be Added to Fees

10.		OFFICERS AND DIRECTORS
TITLE	P	
NAME	GAGEN, MICHELE L	
STREET ADDRESS	4454 GOLDEN LAKE DR	
CITY-ST-ZIP	SARASOTA, FL 34233	
TITLE		
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		
NAME		
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CITY-ST-ZIP		

U00000563357
05/20/06-80008-011 550.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: _____   5/4/06   941-9244858

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #