2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000077004

Entity Name: COASTLAND AUTO ROAD RANGERS, INC.

FILED Apr 05, 2005 Secretary of State

Current Principal Place of Business:		New Principal Place of Business:	
5939 SHIRLEY STREET NAPLES, FL 339421817		3771 15TH AVENUE SW NAPLES, FL 341175356	
Current Mailing Address:		New Mailing Address:	
5939 SHIRLEY STREET NAPLES, FL 339421817			
FEI Number: 65-0942664	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and Address of Current Registered Agent:		Name and Address of New Registered Agent:	
SOUTHWEST PROFESS ERS, INC. 13571 MCGREGORY BLV FORT MYERS, FL 33919		MY	

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both,

Electronic Signature of Registered Agent
Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

in the State of Florida.

SIGNATURE:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Date

Title: () Delete Title: (X) Change () Addition MACFARLANE, STEWART MACFARLANE, STEWART Name: Name: 5939 SHIRLEY ST Address: 735 BELAIRE COURT Address: City-St-Zip: NAPLES, FL 339421817 City-St-Zip: NAPLES, FL 341033524

Title: V () Delete Title: V (X) Change () Addition Name: KIRBY, BOBBY J Name: KIRBY, BOBBY J

 Name:
 KIRBY, BOBBY J
 Name:
 KIRBY, BOBBY J

 Address:
 5939 SHIRLEY ST
 Address:
 3771 15TH AVENUE SW

 City-St-Zip:
 NAPLES, FL 339421817
 City-St-Zip:
 NAPLES, FL 341175356

Title: T () Delete Title: P (X) Change () Addition
Name: MACFARLANE, MARY Name: MACFARLANE, MARY

 Name:
 MACFARLANE, MARY
 Name:
 MACFARLANE, MARY

 Address:
 5939 SHIRLEY ST
 Address:
 735 BELAIRE COURT

 City-St-Zip:
 NAPLES, FL 339421817
 City-St-Zip:
 NAPLES, FL 341033524

Title: S () Delete Title: S (X) Change () Addition Name: KIRBY, TAMMY Name: KIRBY, TAMMY

 Address:
 5939 SHIRLEY ST
 Address:
 3771 15TH AVENUE SW

 City-St-Zip:
 NAPLES, FL 339421817
 City-St-Zip:
 NAPLES, F: 341175356

I hereby certify that the information supplied with this filing does not qualify for the 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 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: BOBBY J KIRBY VP 04/05/2005