

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000106200

FILED
Apr 27, 2004
Secretary of State

Entity Name: COATES & COATES, INC.

Current Principal Place of Business:

300 NORTH OSCEOLA AVENUE APT. 4B
CLEARWATER, FL 33755

New Principal Place of Business:

300 NORHT OSCEOLA AVENUE SUITE #4B
CLEARWATER, FL 33755

Current Mailing Address:

300 NORTH OSCEOLA AVENUE APT. 4B
CLEARWATER, FL 33755

New Mailing Address:

300 NORTH OSCEOLA AVENUE SUITE #4B
CLEARWATER, FL 33755

FEI Number: 59-3611916

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COATES, THOMAS W
300 NORTH OSCEOLA AVENUE APT. 4B
CLEARWATER, FL 33755 US

Name and Address of New Registered Agent:

COATES, THOMAS W
300 NORTH OSCEOLA AVENUE SUITE #4B
CLEARWATER, FL 33755 US

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:

04/27/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPT () Delete
Name: COATES, THOMAS W
Address: 300 NORTH OSCEOLA AVENUE APT. 4B
City-St-Zip: CLEARWATER, FL 33755

Title: DSVP () Delete
Name: COATES, MARLENE M
Address: 300 NORTH OSCEOLA AVENUE APT. 4B
City-St-Zip: CLEARWATER, FL 33755

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPT (X) Change () Addition
Name: COATES, THOMAS W
Address: 300 NORTH OSCEOLA AVENUE SUITE #4B
City-St-Zip: CLEARWATER, FL 33755

Title: DSVP (X) Change () Addition
Name: COATES, MARLENE M
Address: 300 NORTH OSCEOLA AVENUE SUITE #4B
City-St-Zip: CLEARWATER, FL 33755

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: THOAMS W. COATES

DPT

04/27/2004

Electronic Signature of Signing Officer or Director

Date