


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 30, 2007 08:00 AM
Secretary of State

DOCUMENT # 385969
 1. Entity Name
 COASTAL MATERIALS, INC.



Principal Place of Business 157 JOHN SIMS PARKWAY P.O. BOX 447 VALPARAISO, FL 32580	Mailing Address 157 JOHN SIMS PARKWAY P.O. BOX 447 VALPARAISO, FL 32580
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03202007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-1362504	Applied For Not Applicable
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5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 FLEMING, WILLIAM M
 500 GULF SHORE DR
 UNIT 622
 DESTIN, FL 32541

DO NOT WRITE 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable.

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

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

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY- ST- ZIP	PD FLEMING, WILLIAM M 500 GULF SHORE DR DESTIN, FL
TITLE NAME STREET ADDRESS CITY- ST- ZIP	STD FLEMING, CAROLYN D 500 GULF SHORE DR., #622 DESTIN, FL
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 04/06/07-80025-005 158.75

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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: Carolyn D. Fleming CAROLYN D. Fleming 3/29/07 (850) 678-1099
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Desktop Phone #