

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000011036

FILED
Apr 13, 2009
Secretary of State

Entity Name: COASTAL RESOURCES GROUP, INC.

Current Principal Place of Business:

23797 NE 189TH ST.
SALT SPRINGS, FL 32134

New Principal Place of Business:

Current Mailing Address:

2824 FALLING LEAVES DRIVE
VALRICO, FL 33596

New Mailing Address:

FEI Number: 54-2138903

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

LEWIS, ROY R III
23797 NE 189TH ST.
SALT SPRINGS, FL 32134 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: LEWIS, ROY R III
Address: 23797 NE 189TH ST.
City-St-Zip: SALT SPRINGS, FL 32134

Title: VD () Delete
Name: KRUEER, CURTIS R
Address: P.O. BOX 753
City-St-Zip: SHERIDAN, MT 59749

Title: STD () Delete
Name: FLYNN, LAURA L
Address: 2824 FALLING LEAVES RD
City-St-Zip: VALRICO, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROY R. LEWIS III

PRES

04/13/2009

Electronic Signature of Signing Officer or Director

Date