

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000069384

FILED
Aug 25, 2009
Secretary of State

Entity Name: COASTAL HOME INSPECTION SERVICES, INC.

Current Principal Place of Business:

5870 MUSTANG CIR.
PORT ST. LUCIE, FL 34987

New Principal Place of Business:

Current Mailing Address:

5870 MUSTANG CIR.
PORT ST. LUCIE, FL 34987

New Mailing Address:

FEI Number: 20-3285990

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STEPHENS, WILL H JR
5870 MUSTANG CIR.
PORT ST. LUCIE, FL 34987 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PST () Delete
Name: STEPHENS, WILL H JR
Address: 5870 MUSTANG CIR.
City-St-Zip: PORT ST. LUCIE, FL 34987

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WILL STEPHENS

PST

08/25/2009

_____ Electronic Signature of Signing Officer or Director

_____ Date