2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000074614

City-St-Zip:

FT. WALTON BEACH, FL 32547

Entity Name: COASTAL BUSINESS PRODUCTS, INC

FILED Jan 11, 2006 Secretary of State

Littly Nai	IIIe. COASTAL	. DOSINE	33 FRODUCTS, IN	С.		
Current Principal Place of Business:				New Principal Place o	New Principal Place of Business:	
	LBURT ROAD ON BEACH, FL	. 32547	US			
Current Mailing Address:				New Mailing Address:		
	LBURT ROAD ON BEACH, FL	. 32547	US			
FEI Number:	: 59-3406584	FEI Num	ber Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of C	urrent Re	egistered Agent:	Name and Address of	ne and Address of New Registered Agent:	
220 WEST SUN TRUS PENSACC The above	IARGARET GARDEN STF ST TOWER 9T DLA, FL 32501 named entity s	H FLOOF US		purpose of changing its registered	office or registered agent, or both,	
in the State	e of Florida.			,p	,	
SIGNATUR	RE:					
Electronic Signature of Registered Agent				ent	Date	
Election Car	mpaign Financing	Trust Fund	d Contribution ().			
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	DP () MAY, KIERAN 1855 HURLBUR FT. WALTON BE		32547	Title: (Name: Address: City-St-Zip:) Change ()Addition	
Title: Name: Address: City-St-Zip:	DV () MAY, PATRICK 1855 HURLBUR FT. WALTON BE	T ROAD	32547	Title: (Name: Address: City-St-Zip:) Change ()Addition	
Title: Name: Address:	DT () IRVINE, BRUCE 1855 HURLBUR			Title: (Name: Address:) Change ()Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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.

City-St-Zip:

SIGNATURE: BRUCE A. IRVINE DT 01/11/2006