## 2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N0400005206

**Entity Name: COAST AQUATICS INC** 

**Current Principal Place of Business:** 

204 BUCK DRIVE NE

FORT WALTON BEACH, FL 32548

**Current Mailing Address:** 

204 BUCK DRIVE NE

FORT WALTON BEACH. FL 32548

FEI Number: 27-0096004 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

STROM, TRACY 204 BUCK DRIVE NE

FORT WALTON BEACH, FL 32548 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:

Electronic Signature of Registered Agent

Date

**FILED** Jan 12, 2018

**Secretary of State** 

CC4818240234

Officer/Director Detail:

Title **MEMBER** Title **TREASURER** DEROSA, STACIE Name BALENT, ANGELA Name

1910 KADIMA CIRCLE Address 113 SLEEPY OAKS RD Address

City-State-Zip: FORT WALTON BEACH FL 32548 FORT WALTON BEACH FL 32547 City-State-Zip:

VΡ Title Title **PRESIDENT** 

Name DOLLOFF, SARAH Name JETTON, CURTIS Address 103 MEADOW WOODS Address 4243 OTTERLAKE COVE NICEVILLE FL 32578 City-State-Zip: City-State-Zip: NICEVILLE FL 32578

Title **MEMBER** Title **SECRETARY** 

Name HORRIGAN, LYNN VELEZ. TANIA Name

Address 319 EVERGREEN AVENUE 372 BROOKWOOD BLVD. Address City-State-Zip: NICEVILLE FL 32578 City-State-Zip: MARY ESTHER FL 32569

I hereby 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 all other like empowered.

01/12/2018 SIGNATURE: STACIE DEROSA **MEMBER**