2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 10, 2007
Secretary of State

DOCUMENT# 139984

Entity Name: COASTAL PETROLEUM COMPANY

Current Principal Place of Business:

29 AVENUE E, SUITE 5
APALACHICOLA, FL 32320 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 609
APALACHICOLA, FL 32329

New Mailing Address:

FEI Number: 06-0674801 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DVP ( ) Delete
Name: ANGERER, ROBERT J
Address: 7268 BLOUNTSTOWN HWY
City-St-Zip: TALLAHASSEE, FL 32310

Title: PTD ( ) Delete
Name: WARE, PHILLIP W
Address: 90 16TH STREET
City-St-Zip: APALACHICOLA, FL 32320

Title: D ( ) Delete
Name: CANNON, MATTHEW D
Address: 10925 NW 12TH PLACE
City-St-Zip: GAINESVILLE, FL 32606

Title: D ( ) Delete
Name: HAUGHTON, HERBERT
Address: 1062 DOGTOWN ROAD
City-St-Zip: QUINCY, FL 32352

Title: D ( ) Delete
Name: RANDAZZO, ANTHONY F
Address: P. O. BOX 14956
City-St-Zip: GAINESVILLE, FL

Title: S ( ) Delete
Name: ANGERER, ROBERT J JR
Address: 6354 BELLGRAND DRIVE
City-St-Zip: TALLAHASSEE, FL 32312

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:

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 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: PHILLIP W WARE PRES 04/10/2007
Electronic Signature of Signing Officer or Director Date