2006 FOR PROFIT CORPORATION ANNUAL REPORT

May 03, 2006 08:00 AM Secretary of State **DOCUMENT #417528** COASTAL THEATRE PRODUCTIONS INC Principal Place of Business Mailing Address 25 N. PINEAPPLE AVE. 25 N. PINEAPPLE AVE. SARASOTA, FL 34236 SARASOTA, FL 34236 05012006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-1445541 Not Applicable \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent SHEA, JOHN J. J DO NOT WRITE 720 S ORANGE AVE SARASOTA, FL 34236 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable (NOTE, Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE TUROFF, ROBERT E NAME STREET ADDRESS 5674 BEE RIDGE RD. EXT. CITY-\$T-ZIP SARASOTA, FL U00000561250 05/19/06-80007-002 150.00 ANTOLIK, FELICIA NAME STREET ADDRESS 2966 LOUISE ST CITY-ST-ZIP SARASOTA, FL 34237 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

NAME STREET ADDRESS CITY-ST-ZIP

FILED