

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 708801

(6)

1. Corporation Name

COASTAL PLAYERS, INC.



Principal Place of Business

183 TEQUESTA DR
TEQUESTA FL 33469
US

Mailing Address

P. O. BOX 1641 N/A
JUPITER FL 33468-1641
US

3. Date Incorporated or Qualified
04/13/1965

3a. Date of Last Report
05/01/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

WHITE, CHARLES R.L.
725 N. AIA
SUITE E-102
JUPITER FL 33477

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	DP	<input type="checkbox"/> DELETE
NAME	BLANEY, DONALD A.	
STREET ADDRESS	326 JUPITER LAKES BLVD	
CITY-ST-ZIP	JUPITER FL	
TITLE	DST	<input checked="" type="checkbox"/> DELETE
NAME	HARRIS, STEVEN A.	
STREET ADDRESS	222 US HWY ONE SUITE 214	
CITY-ST-ZIP	TEQUESTA FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	EMLEY, BOYCE	
STREET ADDRESS	4915 CARIBBEAN CT.	
CITY-ST-ZIP	TEQUESTA FL	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	WHITE, LINDA	
STREET ADDRESS	17212 126TH TERRACE N.	
CITY-ST-ZIP	JUPITER FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

1.1 TITLE	DT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE	D	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	RICHARD ANSCHUTZ	
2.3 STREET ADDRESS	10158 SE ACORN WAY	
2.4 CITY-ST-ZIP	TEQUESTA FL	
3.1 TITLE	DP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	EMLEY, SUSAN	
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE	D	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	JOSEPHSON, BEVERLY	
4.3 STREET ADDRESS	19961 SEABROOK RD	
4.4 CITY-ST-ZIP	TEQUESTA, FL 33	
5.1 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME	McPOLAND, PATRICK	
5.3 STREET ADDRESS	1640 TWELVE OAKS WAY	
5.4 CITY-ST-ZIP	NORTH PALM BEACH, FL	
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Donald A. Blaney

DONALD A. BLANEY

4/20/96

407/746-6303

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (12/95)