

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 754176

FILED
Apr 28, 2006
Secretary of State

Entity Name: COASTAL OASIS MINISTRIES, INC

Current Principal Place of Business:

13301 WALSINGHAM RD
LARGO, FL 33774

New Principal Place of Business:

Current Mailing Address:

13301 WALSINGHAM RD
LARGO, FL 33774

New Mailing Address:

FEI Number: 59-1118435

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DENHAM, DALE T.
7616 CUMBERLAND RD.
LARGO, FL 33777 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

OFFICERS AND DIRECTORS:

Title: VD () Delete
Name: BONE, BEVERLY
Address: 1660 GULF BLVD # 705
City-St-Zip: CLEARWATER, FL 33767

Title: PD () Delete
Name: DENHAM, DALE T.
Address: 7616 CUMBERLAND RD.
City-St-Zip: LARGO, FL 33777

Title: SD () Delete
Name: PULS, WILLIAM
Address: 9490 HARBOUR GREEN WAY C505
City-St-Zip: SEMINOLE, FL 33776

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:

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DALE T. DENHAM

PD

04/28/2006

Electronic Signature of Signing Officer or Director

Date