

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 755554

FILED  
Feb 14, 2009  
Secretary of State

Entity Name: COASTAL SOARING ASSOCIATION, INC.

**Current Principal Place of Business:**

438 E GOVERNMENT STREET  
C/O ROY M. KINSEY, JR  
PENSACOLA, FL 325016132

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 1502  
PENSACOLA, FL 325016132

**New Mailing Address:**

FEI Number: 59-3168337

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

KINSEY, ROY M JR  
438 E GOVERNMENT ST  
PENSACOLA, FL 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: TD ( ) Delete  
Name: STEELE, KENNETH L  
Address: 708 LAGOON DR  
City-St-Zip: PENSACOLA, FL 32505

Title: SD ( ) Delete  
Name: RABON, DON  
Address: 15798 J.C. COOPER ROAD  
City-St-Zip: BAY MINETTE, AL

Title: PD ( ) Delete  
Name: KUEHMEIR, JOSEPH K  
Address: 11533 CLEAR CREEK DR.  
City-St-Zip: PENSACOLA, FL

Title: VD ( ) Delete  
Name: TARVER, RALPH  
Address: 9070 PASADENA  
City-St-Zip: PENSACOLA, FL 32534

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: TD (X) Change ( ) Addition  
Name: HINOTE, ROGER K  
Address: 2941 LAWSON LANE  
City-St-Zip: CANTONMENT, FL 32533

Title: SD (X) Change ( ) Addition  
Name: BOLYARD, JOHN  
Address: 3055 WUBDERNERE DR.  
City-St-Zip: PENSACOLA, FL 32503

Title: PD (X) Change ( ) Addition  
Name: JOHNSON, TOM  
Address: 3520 HOPESTILL RD.  
City-St-Zip: PENSACOLA, FL 32503

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: ROGER HINOTE

TD

02/14/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date