

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000003834

FILED
Jul 07, 2004
Secretary of State

Entity Name: COASTAL CONTRACTORS OF GEORGIA, INC.

Current Principal Place of Business:

211 PLANTATION CIR.
ST. MARYS, GA 31558

New Principal Place of Business:

1921 OSBORNE RD #6
ST. MARYS, GA 31558

Current Mailing Address:

BOX 5057
ST. MARYS, GA 31558

New Mailing Address:

FEI Number: 41-2100533 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SIEVERS, MARK
325 BLANCA AVE
TAMPA, FL 33606 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: P () Delete
Name: SIEVERS, MARK
Address: 325 BLANCA AVE
City-St-Zip: TAMPA, FL 33606

Title: V () Delete
Name: FOLSOM, DAVID K
Address: 211 PLANTATION CIRCLE
City-St-Zip: ST. MARYS, GA 31558

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: V (X) Change () Addition
Name: FOLSOM, DAVID K
Address: 1921 OSBORNE RD. # 6
City-St-Zip: ST. MARYS, GA 31558

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: DAVID K. FOLSOM

VP

07/07/2004

Electronic Signature of Signing Officer or Director

Date