2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000005124

Entity Name: COASTAL INDUSTRIAL PRODUCTS COMPANY

FILED Apr 15, 2009 Secretary of State

| Current Principal Place of Business: | | | New Princ | New Principal Place of Business: | | |
|---|---|--------------------------------|---|---|------------------------------------|--|
| 8007 FL- G HAVANA, I | | | | | | |
| Current Mailing Address: | | | New Mailing Address: | | | |
| P.O. BOX [*] HAVANA, I | | | | | | |
| FEI Number: 56-1274448 FEI Number Applied For () | | FEI Number Not Applicable () | | Certificate of Status Desired (X) | | |
| Name and Address of Current Registered Agent: | | | Name and | Name and Address of New Registered Agent: | | |
| 1200 SOU | ORATION SY: TH PINE ISLAI ON, FL 33324 | ND ROAD | | | | |
| The above in the State | | submits this statement for the | ourpose of changing i | ts registered of | fice or registered agent, or both, | |
| SIGNATUR | SE. | | | | | |
| 0,0,0,0 | | ic Signature of Registered Ag | ent | | Date | |
| Election Can | npaign Financin | g Trust Fund Contribution (). | | | | |
| OFFICERS AND DIRECTORS: | | | ADDITION | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | | |
| Title: Name: Address: City-St-Zip: | PD () ROCKWOOD, P.O. BOX 1128 HAVANA, FL 33 | | Title: Name: Address: City-St-Zip: | PCOO (X) PATTILLO, JIM P.O. BOX 1128 HAVANA, FL 32 | Change () Addition | |
| Title: Name: Address: City-St-Zip: | VD () EVANS, THOM/ P.O. BOX 829 WELDON, NC | | Title: Name: Address: City-St-Zip: | ST (X) BRYANT, J. TRA P.O. BOX 829 WELDON, NC 2 | | |
| Title: Name: Address: City-St-Zip: | TS (X STRANGE, MAI P.O. BOX 1128 HAVANA, FL 3: | | Title: Name: Address: City-St-Zip: | () | Change () Addition | |
| Title: Name: Address: City-St-Zip: | D (X, LUZAK, KEVIN P.O. BOX 1128 HAVANA, FL 3: | | Title: Name: Address: City-St-Zip: | () | Change () Addition | |

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

SIGNATURE: J. TRAVIS BRYANT TS 04/15/2009