


2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # F07000003366 1. Entity Name COOK COASTAL RENTALS, INC.	
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FILED
Jul 15, 2008 08:00 AM
Secretary of State

Principal Place of Business 11196 HWY 31 SPANISH FORT, AL 36527	Mailing Address 11196 HWY 31 SPANISH FORT, AL 36527
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07092008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 63-1226624	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent ROWE, GLENN M JR 7813 HWY 90 MILTON, FL 32570

DO NOT WRITE
IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

**FILE NOW!!! FEE IS \$150.00
Due by September 12, 2008**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS	
TITLE	PC
NAME	COOK, MILES S III
STREET ADDRESS	11196 HWY 31
CITY-ST-ZIP	SPANISH FORT, AL 36527
TITLE	STD
NAME	COOK, MELISSA H
STREET ADDRESS	11196 HWY 31
CITY-ST-ZIP	SPANISH FORT, AL 36527
TITLE	D
NAME	COOK, SALLY M
STREET ADDRESS	11196 HWY 31
CITY-ST-ZIP	SPANISH FORT, AL 36527
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE
IN THIS SPACE

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07/15/08-80001-001-158.75

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Melissa H Cook 7-9-08 251 621-1515

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #