


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 25, 2005 08:00 AM
Secretary of State

DOCUMENT # F74006 1. Entity Name COASTAL DEVELOPMENT PLANNING CO.	
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Principal Place of Business 36468 EMERALD COAST PKWY SUITE 1010T DESTIN, FL 32541 US	Mailing Address 36468 EMERALD COAST PKWY SUITE 1010T DESTIN, FL 32541 US
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04202005 No Chg-P CR2E034 (10/03)

4. FEI Number 59-2187188	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent SHOULTS, HOWARD RAY 36468 EMERALD COAST PKWY STE. 10101 DESTIN, FL 32541
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**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 _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD SHOULTS, HOWARD RAY 36468 EMERALD COAST PKWY, STE. 10101 DESTIN, FL 32541
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VSTD GWIN, CURTIS H. 36468 EMERALD COAST PKWY, STE. 10101 DESTIN, FL 32541
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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04/25/05-80098-008 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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:  Ray Shoults 4-20-05 850-837-0392
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #