

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 15, 2004 8:00 am
Secretary of State

07-01-2004 90002 048 ***150.00

DOCUMENT # F95000000504

1. Entity Name
COASTAL CAPITAL CORP.



Principal Place of Business
**ONE PLAZA RD
GREENVALE, NY 11548 US**

Mailing Address
**ONE PLAZA RD
GREENVALE, NY 11548 US**

66429960



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

06252004

Chg-P

CR2E034 (10/03)

City & State

City & State

4. FEI Number

11-2924685

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**MICHAEL, JOHN T
220 PONTE VERDA PARK DRIVE
SUITE 200
PONTE VEDRA BEACH, FL 32082**

7. Name and Address of New Registered Agent

Name

City

State

Zip

Country

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 reappointing)

DATE

**FILE NOW!!! FEE IS \$550.00
Due by September 8, 2004**

9. Election Campaign Financing
Trust Fund Contribution.

☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P ☐ Delete
NAME MICHAEL, JOHN T
STREET ADDRESS ONE PLAZA ROAD
CITY-ST-ZIP GREENVALE, NY 11548

TITLE C ☐ Delete
NAME MICHAEL, JOHN T
STREET ADDRESS ONE PLAZA ROAD
CITY-ST-ZIP GREENVALE, NY 11548

TITLE SVP ☐ Delete
NAME BAINES, ANTONIO
STREET ADDRESS 2400 GUENTHER COURT
CITY-ST-ZIP BALDWIN, NY 11510

TITLE SVP ☐ Delete
NAME BASELICE, STEVEN A
STREET ADDRESS 1546 PARSONS BLVD.
CITY-ST-ZIP WHITESTONE, NY 11357

TITLE EVPD ☐ Delete
NAME POLLATOS, LISA
STREET ADDRESS 12 WOODFIELD LANE
CITY-ST-ZIP OLD BROOKVILLE, NY

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 1921 Helen Court
CITY-ST-ZIP Merrick, NY 11566

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Secretary + Corp. Counsel ☐ Change ☒ Addition
NAME Michael A. Gallan
STREET ADDRESS 20 Beverly Road
CITY-ST-ZIP New Rochelle NY 10804

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(ii), 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: *Michael Gallan* **Michael Gallan** 6/21/04 5/6/931-5005
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #



Attachment

66429960
F9500000504

1 Plaza Road
Greenvale, New York 11548
Tel: (516) 931-5005
Fax: (516) 931-2244
Toll Free: 1-800-640-0100
Licensed Mortgage Banker, NYS Banking Department

July 13, 2004

Division of Corporations
2670 Executive Center Circle
Suite 100
Tallahassee, FL 32301

Re: Amended Annual Report for 2004

Dear Sir or Madam:

Please accept the enclosed Annual Report for the year of 2004. It was returned to me to get a signature from the new registered agent, when in fact, the registered agent for Coastal Capital Corp. has not changed. This was an error on my part and I have enclosed the corrected Annual Report for filing.

If you have any questions or need any additional information, please do not hesitate to contact me at (516) 931-5005 extension 13934.

Thank you in advance for your anticipated co-operation.

Sincerely,

Christine Berti
Paralegal



COASTAL CAPITAL CORP.

The Mortgage Wave of the Future

Attachments
P5500000504

66429960

1 Plaza Road
Greenvale, New York 11548
Tel: (516) 931-5005
Fax: (516) 931-2244
Toll Free: 1-800-640-0100
Licensed Mortgage Banker, NYS Banking Department

June 28, 2004

Division of Corporations
2670 Executive Center Circle
Suite 100
Tallahassee, FL 32301

Re: Request to Waive Late Fee for Annual Report Filing

Dear Sir or Madam:

Please accept this letter as written request to waive the \$400 late fee for filing Coastal Capital Corp.'s 2004 For Profit Corporation Annual Report after the May 1st deadline. The renewal paperwork was never received in order to process in a timely matter.

We are licensed to do business nationwide which sometimes creates a problem because there is always something that has to be renewed at any given time. What helps to simplify this task is when we receive notification of the renewal in the mail. Since this did not happen with the 2004 Annual Report, it slipped through the cracks. I assure you, measures are being taken immediately to ensure this does not happen in the future. For now, please accept the enclosed check for \$150 as payment in full for the Annual Report filing fee, waiving the late penalties.

If you have any questions or need to speak to me, please do not hesitate to contact me at (516) 931-5005 extension 13934.

Thank you in advance for your anticipated co-operation.

Sincerely,

Christine Berti
Paralegal