

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED

02 JUL 30 AM 11:17

DOCUMENT # 096124

1. Entity Name

COASTAL FINANCIAL SECURITY FUND INCORPORATED

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

100006914351--8

-08/06/02--01040--007

*****61.25 *****61.25

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
560 Route 303

3. Mailing Address
560 Route 303

Suite, Apt. #, etc.
Suite 202

Suite, Apt. #, etc.
Suite 202

City & State
Orangeburg, New York

City & State
Orangeburg, New York

4. FEI Number
59-24000504

Applied For
☐ Not Applicable

Zip 10962 Country USA

Zip 10962 Country USA

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

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IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name Blumberg, Excelsior

Street Address (P.O. Box Number is Not Acceptable)
4435 Old Winter Garden Road

City Orlando FL Zip Code 32811

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.

SIGNATURE

Stephen E. Moore

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

7/8/02

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.
(See criteria on back) ☐

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Department of State

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

11. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Stephen E. Moore-Director
228 W. 71st Street, Apt. 4M
New York, New York 10023

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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13. 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE:

Stephen E. Moore

Stephen E. Moore

845-398-0400

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

DAYTIME PHONE

CR2E034B (12/01)

7/8/02