

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J55780

FILED
Mar 08, 2005
Secretary of State

Entity Name: COASTLIFE RESOURCES, INC.

Current Principal Place of Business:

2432 BAY GROVE RD
FREEPORT, FL 32439 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 6278
DESTIN, FL 32550

New Mailing Address:

P.O. BOX 6278
MIRAMAR BEACH, FL 32550

FEI Number: 59-2767861

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WALDROP, ELOISE
2432 BAY GROVE RD
FREEPORT, FL 32439 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: WALDROP, THOMAS B JR.
Address: 2432 BAY GROVE RD
City-St-Zip: FREEPORT, FL 32439

Title: ST () Delete
Name: WALDROP, ELOISE
Address: 2432 BAY GROVE RD
City-St-Zip: FREEPORT, FL 32439

Title: V () Delete
Name: WALDROP, THOMAS B III
Address: 1083 BAY GROVE RD.
City-St-Zip: FREEPORT, FL 32439

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: WALDROP, THOMAS B III
Address: 1083 BAY GROVE RD.
City-St-Zip: FREEPORT, FL 32439

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ELOISE B. WALDROP

ST

03/08/2005

Electronic Signature of Signing Officer or Director

Date