

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J55780

FILED  
Feb 27, 2007  
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  
MIRAMAR BEACH, FL 32550

## New Mailing Address:

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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

02/27/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date