2007 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # K76063

1. Entity Name

COAST ENGINE & EQUIPMENT COMPANY, INC.



Principal Place of Business

Mailing Address

8985 COLUMBIA RD

CAPE CANAVERAL, FL 32920 U

8985 COLUMBIA RD

CAPE CANAVERAL, FL 32920

US

FILED Jan 29, 2007 08:00 AM Secretary of State



01222007

No Chg-P

CR2E034 (11/05)

4. FEI Number 59-3044441

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324

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	named entity submits this statement for the plans of registered agent.	ourpose of changing its registe	red office or registered agent, or b	oth, in the State of Florida. I am familiar with, and accept	
SIGNATURE.			·		
	Signature, typed or printed name of registered agent and title	if applicable. (NOTE Hegister	red Agent signature required when reinstating)	DAYE	
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		Election Campaign Fina Trust Fund Contribution			
10.	OFFICERS AND DIRE	CTORS			
THLE NAME STREET ADDRESS CITY-ST-ZIP"	P HORNE, DARRYL K 2677 PROSPERITY AVENUE, STE. 3 FAIRFAX, VA 22031	00	U00000609966 02/02/07-80003-002 150.0		
THLE NAME STREET ADDRESS CITY-ST-ZIP	CFO MEGLESS, MICHEAL M 2677 PROSPERITY AVENUE, STE. 3 FAIRFAX, VA 22031	00			
NAME STREET ADDRESS CITY-ST-ZIP	SEC SHANNON, PAIGE E 2677 PROSPERITY AVENUE, STE. 3 FAIRFAX, VA 22031	00	DO NOT WRITE IN THIS SPACE		
TITLE NAME STREET ADDRESS GITY-ST-ZIP					
NAME SIREET AODRESS CITY-ST-ZIP				·	
TITLE NAME					

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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: _

STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jan 22, 2007 (703) 641-1100