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## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Apr 20, 2006 08:00 AN Secretary of State

ANNUAL REPURI			Secretary of State			
DOCUMENT # K78849  1. Entity Name COASTAL PROPERTY SERVICES, INC.				Se	ecretary	of State
536 N. MONROE ST.	Mailing Address 536 N. MONROE TALLAHASSEE, FL 32301	us				
DO NOT WRITE I	CE	04182006 No Chg-P CR2E034 (11/05)  4. FEI Number				
6. Name and Address of Current Reg FULLER, DENNIS R 536 N. MONROE ST. TALLAHASSEE, FL 32301			IN 7	NOT W	PACE	
The above named entity submits this statement for the the obligations of registered agent.  SIGNATURE  Signature, typed or printed name of registered agent and it		ed office or register		h, in the State of Fid	orida. I am familia	r with, and accept
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00  9. Election Campaign Financia Trust Fund Contribution.		ncing \$5	.00 May Be ied to Fees			
10. OFFICERS AND DIR	ECTORS	1				
TITLE PVD  NAME FULLER, DENNIS R  STREET ADDRESS 9387 SALEM ROAD  CITY-ST-ZIP QUINCY, FL 32351			•	18000	NACO17AC	
TITLE NAME STREET ADDRESS CITY-ST-2IP				05/02/0	00521705 6-80146-0	13 150.00
TITLE NAME STREET ADDRESS CHY-SI-ZIP TITLE NAME				NOT W		
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME						

12. I hereby certify that the information supplied with this filing 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

4/18/04

205 9025

Daytime Phone #