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Jan 23 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # M65885 (9)

1. Corporation Name
COASTAL STABILIZATION, INC.

Principal Place of Business
7701 INTERBAY BV
PO BOX 13798
TAMPA FL 33616

Mailing Address
7701 INTERBAY BV
PO BOX 13798
TAMPA FL 33616-1513



3. Date Incorporated or Qualified 01/19/1988
3a. Date of Last Report 10/03/1996

2. Principal Place of Business		2a. Mailing Address		4. FEI Number 65-0038259		Applied For	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.				Not Applicable	
22 City & State		27 City & State		5. Certificate of Status Desired		X \$8.75 Additional Fee Required	
23 Zip		28 Zip		6. Election Campaign Financing Trust Fund Contribution		5.00 May Be Added to Fees	
24 Country		29 Country		30		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	
						Yes No	

9. Name and Address of Current Registered Agent

MUELLER, JOHN H
111 MADISON STREET, STE. 2300
TAMPA FL 33602

10. Name and Address of New Registered Agent

81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL
85 Zip Code	

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	11 TITLE	
NAME	DONOHUE, JOHN F	12 NAME	
STREET ADDRESS	21 CONISTON RD	13 STREET ADDRESS	
CITY-ST-ZIP	SHORT HILLS FL	14 CITY-ST-ZIP	
TITLE	V	21 TITLE	
NAME	MCCANN, JOSEPH	22 NAME	
STREET ADDRESS	25 WALSINGHAM ROAD	23 STREET ADDRESS	
CITY-ST-ZIP	MENDHAM NJ	24 CITY-ST-ZIP	
TITLE	STD	31 TITLE	
NAME	TELESMANICH, RICHARD C	32 NAME	
STREET ADDRESS	100 STICKLE AVE.	33 STREET ADDRESS	
CITY-ST-ZIP	ROCKAWAY NJ	34 CITY-ST-ZIP	
TITLE	AS	41 TITLE	
NAME	TEUNE, PETER	42 NAME	
STREET ADDRESS	185 CEDAR LAKE ROAD	43 STREET ADDRESS	
CITY-ST-ZIP	BLAIRSTOWN NJ	44 CITY-ST-ZIP	
TITLE	D	51 TITLE	
NAME	CORWIN, ARTHUR	52 NAME	
STREET ADDRESS	4 HASTINGS ROAD	53 STREET ADDRESS	
CITY-ST-ZIP	MORRIS PLAINS NJ	54 CITY-ST-ZIP	
TITLE		61 TITLE	
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 of this report or on an attachment with an address.

SIGNATURE:
Richard C. Telesmanich, Secretary-Treasurer

(201) 627-2100 (X-220)
January 14, 1997

Date Daytime Phone #

CR2E034 (9/96)