

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000009489

FILED
Mar 21, 2005
Secretary of State

Entity Name: COASTAL SCHOLARSHIP FOUNDATION, INC.

Current Principal Place of Business:

7623 BAYMEADOWS CIRCL WEST #2043
JACKSONVILLE, FL 32256

New Principal Place of Business:

Current Mailing Address:

7623 BAYMEADOWS CIRCL WEST #2043
JACKSONVILLE, FL 32256

New Mailing Address:

FEI Number: 30-0018679

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WHITEHEAD, BARBARA
7623 BAYMEADOWS CIRCL WEST #2043
JACKSONVILLE, FL 32256 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

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MCGILL, KELLY
Address: 908 STONEHILL PLACE
City-St-Zip: ST AUGUSTINE, FL 32092

Title: V () Delete
Name: MCGILL, RYAN
Address: 908 STONEHILL PLACE
City-St-Zip: ST AUGUSTINE, FL 32092

Title: ST () Delete
Name: WHITEHEAD, BARBARA
Address: 7623 BAYMEADOWS CIRCL WEST #2043
City-St-Zip: JACKSONVILLE, FL 32256

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 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BARBARA WHITEHEAD

ST

03/21/2005

Electronic Signature of Signing Officer or Director

Date