2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N47175

FILED May 01, 2009 Secretary of State

Entity Name: THE COASTAL OAKS LOT OWNERS ASSOCIATION, INC. **Current Principal Place of Business: New Principal Place of Business:** 2529 SOUTHERN OAK CIR 2502 SOUTHERN OAK CIR CLEARWATER, FL 33764 US CLEARWATER, FL 33764 US **Current Mailing Address: New Mailing Address:** 2519 SOUTHERN OAK CIR 2502 SOUTHERN OAK CIR CLEARWATER, FL 33764 US CLEARWATER, FL 33764 US FEI Number: 59-3170174 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: WILSON, LAURIE KOSCIELNIAK, JOHN M 2519 SOUTHERN OAK CIR 2502 SOUTHERN OAK CIR US US CLEARWATER, FL 33764 CLEARWATER, FL 33764 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: JOHN M. KOSCIELNIAK 05/01/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete DOTY, MARJORIE Name: Name: 2525 SOUTHERN OAK CIR Address: Address: City-St-Zip: CLEARWATER, FL 33764 City-St-Zip: Title: PD () Delete Title: (X) Change () Addition Name: WILSON, LAURIE Name: KOSCIELNIAK, JOHN M Address: 2519 SOOUTHERN OAK CIR Address: 2502 SOUTHERN OAK CIR City-St-Zip: CLEARWATER, FL 33764 City-St-Zip: CLEARWATER, FL 33764 Title: () Delete Title: SD (X) Change () Addition SENGTHONG, MYLYNH JENSON, KEN Name: Name: 2509 SOUTHERN OAK CIR Address: Address: 2501 SOUTHERN OAK CIR City-St-Zip: CLEARWATER, FL 33764 City-St-Zip: CLEARWATER, FL 33764 Title: () Delete Title: () Change () Addition Name: TOMASZEWICZ, MICHELLE Name: 2507 SOUTHERN OAK CIRCLE Address: Address: City-St-Zip: CLEARWATER, FL 33764 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOHN M. KOSCIELNIAK PD 05/01/2009