

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000064796

FILED  
Apr 21, 2008  
Secretary of State

Entity Name: COAST TO COAST EXTERIORS, INC.

## Current Principal Place of Business:

275 MAGNOLIA AVENUE, SUITE 4  
MERRITT ISLAND, FL 32952

## New Principal Place of Business:

## Current Mailing Address:

275 MAGNOLIA AVENUE, SUITE 4  
MERRITT ISLAND, FL 32952

## New Mailing Address:

FEI Number: 59-3656759

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

JENKINS, VICTORIA  
1635 VEGA AVE  
MERRITT ISLAND, FL 32953 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: JENKINS, VICTORIA  
Address: 1635 VEGA AVE  
City-St-Zip: MERRITT ISLAND, FL 32953

Title: V ( ) Delete  
Name: JENKINS, ROBERT  
Address: 1635 VEGA AVE  
City-St-Zip: MERRITT ISLAND, FL 32953

Title: D ( ) Delete  
Name: MARKS, JOE  
Address: 225 S TROPICAL TRL #417  
City-St-Zip: MERRITT ISLAND, FL 32952

Title: D (X) Delete  
Name: PETRUSKI, CLAY D JR.  
Address: 1635 VEGA AVENUE  
City-St-Zip: MERRITT ISLAND, FL 32953 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: PETRUSKI, CLAY D JR.  
Address: 1635 VEGA AVENUE  
City-St-Zip: MERRITT ISLAND, FL 32953 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: VICTORIA JENKINS

PD

04/21/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date