2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000064796

Address:

City-St-Zip:

414 OAKRIDGE AVE

COCOA, FL 32927

Entity Name: COAST TO COAST EXTERIORS, INC.

FILED Apr 29, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 3708 N COURTENAY PKWY STE 108 MERRITT ISLAND, FL 32953 **Current Mailing Address: New Mailing Address:** 3708 N COURTENAY PKWY STE 108 MERRITT ISLAND, FL 32953 FEI Number: 59-3656759 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: JENKINS, VICTORIA 1635 VEGA AVE MERRITT ISLAND, FL 32953 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition JENKINS, VICTORIA Name: Name: 1635 VEGA AVE Address: Address: City-St-Zip: MERRITT ISLAND, FL 32953 City-St-Zip: Title: Title: () Delete () Change () Addition Name: JENKINS, ROBERT Name: 1635 VEGA AVE Address: Address: MERRITT ISLAND, FL 32953 City-St-Zip: City-St-Zip: Title: Title: (X) Delete () Change () Addition PETRUSKI, CLAY D JR. Name: Name: 1635 VEGA AVENUE Address: Address: City-St-Zip: MERRITT ISLAND, FL 32953 City-St-Zip: Title: (X) Delete Title: () Change () Addition TIEDE, GERALD Name: Name:

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.

Address:

City-St-Zip:

SIGNATURE: VICTORIA JENKINS PD 04/29/2009