


**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jul 16, 2007 08:00 AM
Secretary of State

DOCUMENT # P00000096285		
1. Entity Name COASTAL ELEVATORS, INC.		
Principal Place of Business 9601 N PALAFOX STREET UNIT 5A PENSACOLA, FL 32534	Mailing Address 9601 N PALAFOX STREET UNIT 5A PENSACOLA, FL 32534	
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent AUSTIN, HUBERT T 9601 NORTH PALAFOX STREET UNIT 5A PENSACOLA, FL 32534		DO NOT WRITE IN THIS SPACE
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE: <u>Hubert T Austin</u> (NOTE: Registered Agent signature required when reconstituting) Signature, typed or printed name of registered agent and title if applicable		
FILE NOW!!! FEE IS \$150.00 Due by September 14, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P AUSTIN, HUBERT T 12168 BOULET DRIVE CODEN, AL 36523	DO NOT WRITE IN THIS SPACE
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.		
SIGNATURE: <u>Hubert T Austin</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		7/13/07 1-850-478-9797 Date Daytime Phone #



07052007 No Chg-P CR2E034 (11/05)

4. FEI Number 59-3675295	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

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07/16/07-80002-004 150.00