

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000107442

FILED
Feb 09, 2009
Secretary of State

Entity Name: COASTAL COMMUNITY INVESTMENTS, INC.

Current Principal Place of Business:

12141 PANAMA CITY BEACH PARKWAY
PANAMA CITY BEACH, FL 32407

New Principal Place of Business:

Current Mailing Address:

12141 PANAMA CITY BEACH PARKWAY
PANAMA CITY BEACH, FL 32407

New Mailing Address:

FEI Number: 59-3687240

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DUBOSE, TERRY D
12141 PANAMA CITY BEACH PARKWAY
PANAMA CITY BEACH, FL 32407 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: DP () Delete
Name: DUBOSE, D. TERRY
Address: 12141 PANAMA CITY BEACH PARKWAY
City-St-Zip: PANAMA CITY BEACH, FL 32407

Title: DIR () Delete
Name: BAKER, FRANK
Address: 12141 PANAMA CITY BEACH PARKWAY
City-St-Zip: PANAMA CITY BEACH, FL 32407

Title: DIR () Delete
Name: BENNETT, MIKE
Address: 12141 PANAMA CITY BEACH PARKWAY
City-St-Zip: PANAMA CITY BEACH, FL 32407

Title: DIR () Delete
Name: COUNTS, STEVE
Address: 12141 PANAMA CITY BEACH PARKWAY
City-St-Zip: PANAMA CITY BEACH, FL 32407

Title: DIR () Delete
Name: BLAYLOCK, DEWEY
Address: 12141 PANAMA CITY BEACH PARKWAY
City-St-Zip: PANAMA CITY BEACH, FL 32407

Title: DIR () Delete
Name: BLOODWORTH, LEON
Address: 12141 PANAMA CITY BEACH PARKWAY
City-St-Zip: PANAMA CITY BEACH, FL 32407

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:

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 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: TROY CAMPBELL

SVP

02/09/2009

Electronic Signature of Signing Officer or Director

Date