## **2003 FOR PROFIT CORPORATION**

## **UNIFORM BUSINESS REPORT (UBR)** P01000034846

**DOCUMENT #** 1. Entity Name

COASTAL HOUSING CORP.



**FILED** 

					V VOICE TO S	<b>′</b>				
Principal Place of Business 6152 EAGLES NEST DRIVE JUPITER FL 33458			Mailing Address 6152 EAGLES NEST DRIVE JUPITER FL 33458							
2. Principal Place of Business			3. Mailing Address			_		<b>O</b> BIN <b>COINE</b> 91		81417 <b>8</b> 111 1331
Suite, Apt. #, etc.			Suite, Apt. #, etc.				CHECK HERE IF	MAKING	CHANGES	
City & State			City & State			4.	4. FEI Number 65-1094907 Applied For Not Applicable			
Zip	p Country ·		Zip		Country 5.		Certificate of Status Desired		8.75 Add	ditional
· · · · · · · · · · · · · · · · · · ·	6. Name	and Address of Curren	t Register	ed Agent	<del></del>	7.	Name and Address of New Re			
	<u>-</u>				Name			<u>,</u>	3	
	ll, David f Bles nest			Street Addr			ss (P.O. Box Number is Not Acceptable)			
JUPITER	FL 33458				3			<del></del>		
				,	City		·	FL	Zip Cod	e
		y submits this statement f tered agent.	or the purp	oose of changing its	registered office or regis	stered ac	gent, or both, in the State of Florid	da. I am fa	miliar with,	and accept
SIGNATURE .	Signature, typed	or printed name of registered ager	it and title if app	plicable. (NOTE	: Registered Agent signature requ	uired when r	einstaling)	DATE		
FILE NOW!!! FEE IS \$550.00 After September 10, 2003 Fee will be \$750.00 Make Check Payable to Florida Department of State							Election Campaign Final Trust Fund Contribution.		Added	May Be to Fees
10.		OFFICERS AND	DIRECTO	)RS	11.	A	ODITIONS/CHANGES TO OFFIC	ERS AND I	DIRECTOR	3 IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP		LL, DAVID F GLES NEST DRIVE FL 33458		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-SI-ZIP				☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				Change	Addition
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

561 758 - 3928

Daytime Phone #

Attachment 80136947 # PAINNON34846

Date: 8/5/03

To: Florida Division of Corporations

From: David F. Godshall, Pres. Coastal Housing Corp.

Subj: Coastal Housing Corp. did not receive the prior notice (UBR). Please waive the

penalty.

Thanks.

David F. Godshall, Pres.

Coastal Housing Corp.