

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000051458

**FILED**  
**Jan 16, 2009**  
**Secretary of State**

**Entity Name:** PINELLAS COASTAL DEVELOPMENT COMPANY, INC.

**Current Principal Place of Business:**

780 W. MAPLE  
SUITE 100  
TROY, MI 48099 US

**New Principal Place of Business:**

780 W. MAPLE  
SUITE - B  
TROY, MI 48099 US

**Current Mailing Address:**

PO BOX 414  
TROY, MI 48099 US

**New Mailing Address:**

**FEI Number:** 58-2634061      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

D & B CORPORATE SERVICES, INC.  
5999 CENTRAL AVE., STE. 202  
ST. PETERSBURG, FL 33710 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: PTD ( ) Delete  
Name: ATESIAN, HOWARD P  
Address: PO BOX 414  
City-St-Zip: TROY, MI 48099

Title: VSD ( ) Delete  
Name: SCHACK, JANET A  
Address: PO BOX 414  
City-St-Zip: TROY, MI 48099

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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: HOWARD P. ATESIAN

PTD

01/16/2009

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

\_\_\_\_\_  
Date