## 2011 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P01000057156

Entity Name: COASTAL FACILITY PRODUCTS CORP.

FILED Mar 04, 2011 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 5507 CHAPARA LN 5507 CHAPARA LN HOLIDAY, FL 34690 HOLIDAY, FL 34690 UN **Current Mailing Address: New Mailing Address:** PO BOX 3873 PO BOX 3873 HOLIDAY, FL 34692 HOLIDAY, FL 34692 UN FEI Number: 59-3723876 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: STUHL, MARTIN 5507 CHAPARA LN HOLIDAY, FL 34690 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

## **OFFICERS AND DIRECTORS:**

Title:

 Name:
 MARTIN, STUHL

 Address:
 5507 CHAPARA LN

 City-St-Zip:
 HOLIDAY, FL 34690 UN

I hereby 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 all other like empowered.

SIGNATURE: MARTIN STUHL PRES 03/04/2011