2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 09, 2004
Secretary of State

DOCUMENT# P01000059367

Entity Name: COASTLINE CONCRETE INC.

Current Principal Place of Business:

615 INDIANA AVENUE
LYNN HAVEN, FL 32444 US

New Principal Place of Business:

Current Mailing Address:

615 INDIANA AVENUE
LYNN HAVEN, FL 32444 US

New Mailing Address:

FEI Number: 59-3725448 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BERNARD, STEPHEN D
2541 FEROL LANE
LYNN HAVEN, FL 32444 US

Name and Address of New Registered Agent:

BERNARD, STEPHEN D
615 INDIANA AVENUE
LYNN HAVEN, FL 32444 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: STEPHEN D. BERNARD 04/09/2004
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: V ( ) Delete
Name: MELVILLE, JOHN P
Address: 5653 CREWS LAKE RD
City-St-Zip: EBRO, FL 32437

Title: S ( ) Delete
Name: MOORE, MELINDA K
Address: 2541 FEROI LANE
City-St-Zip: LYNN HAVEN, FL 32444

Title: P ( ) Delete
Name: BERNARD, STEPHEN D
Address: 2541 FEROL LANE
City-St-Zip: LYNN HAVEN, FL 32444

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: S (X) Change ( ) Addition
Name: MOORE, MELINDA K
Address: 615 INDIANA AVENUE
City-St-Zip: LYNN HAVEN, FL 32444

Title: P (X) Change ( ) Addition
Name: BERNARD, STEPHEN D
Address: 615 INDIANA AVENUE
City-St-Zip: LYNN HAVEN, FL 32444

I hereby certify that the information supplied with this filing does not qualify for the 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 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: MELINDA K. MOORE S 04/09/2004
Electronic Signature of Signing Officer or Director Date