2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000066357

Entity Name: COASTAL DESIGN STUDIO, INC.

FILED Apr 20, 2006 Secretary of State

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Current P	rincipal Place	of Business:	New Prince	New Principal Place of Business:		
	Y 98 W STE 10	6	151 MARY	151 MARY ESTHER BLVD		
DESTIN, F	FL 32550		405 A MARY ES	405 A MARY ESTHER, FL 32569		
Current Mailing Address:			New Mail	New Mailing Address:		
8955 HWY 98 W STE 106 DESTIN, FL 32550				151 MARY ESTHER BLVD 405 A		
<i>D</i>	2 02000			THER, FL 3	32569	
FEI Number	: 02-0632034	FEI Number Applied For ()	FEI Number Not App	olicable ()	Certificate of Status Desired ()	
Name and	d Address of C	current Registered Agent:	Name and	Name and Address of New Registered Agent:		
SUITE 405	ESTHER BLV					
	e named entity : e of Florida.	submits this statement for the p	ourpose of changing	its registere	ed office or registered agent, or both,	
SIGNATU	RE:					
	Electror	ic Signature of Registered Age	ent		Date	
Election Ca	mpaign Financin	g Trust Fund Contribution ().				
OFFICER	S AND DIREC	TORS:	ADDITIO	NS/CHANG	ES TO OFFICERS AND DIRECTOR	
Title: Name:	CARLEE, GEO		Title: Name:	D CARLEE, G		
Address: City-St-Zip:	195 BAY TREE DESTIN, FL 32		Address: City-St-Zip:	40 GRAND FLORA WAY SANTA ROSA BEACH, FL 32569		
Title: Name: Address: City-St-Zip:	HARMAN, SUZA 174 WATERCO	Delete ANNE DLOR WAY #203 BEACH, FL 32459	Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	D () WRIGHT, LEIG 88 TERR. COT DESTIN, FL 32	TA WAY.	Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	D () PORTER-SMITI 237 WEKIVA C DESTIN, FL 32	OVE	Title: Name: Address: City-St-Zip:		() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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: KELLY PORTER-SMITH D 04/20/2006