2003 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 16, 2003
Secretary of State

DOCUMENT# P02000088385

Entity Name: COASTAL REALTY PARTNERS, INC.

Current Principal Place of Business:

9951 ATLANTIC BLVD.
SUITE 316
JACKSONVILLE, FL 32225

New Principal Place of Business:

Current Mailing Address:

9951 ATLANTIC BLVD.
SUITE 316
JACKSONVILLE, FL 32225

New Mailing Address:

FEI Number: 56-2284656 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HYNES, JAMES R
9951 ATLANTIC BLVD.
SUITE 316
JACKSONVILLE, FL 32225

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: PD ( ) Delete
Name: WILLIAMS, CARL
Address: 4381 SYCAMORE PASS CT. W
City-St-Zip: JACKSONVILLE, FL 32258

Title: VD ( ) Delete
Name: WILLIAMS, SALLY
Address: 4381 SYCAMORE PASS CT. W
City-St-Zip: JACKSONVILLE, FL 32258

Title: STD ( ) Delete
Name: HYNES, JAMES R
Address: 11810 INDIAN BLUFF COVE
City-St-Zip: JACKSONVILLE, FL 32225

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: WILLIAMS, CARL
Address: 10874 SKYLARK MANOR CT.
City-St-Zip: JACKSONVILLE, FL 32257

Title: VD (X) Change ( ) Addition
Name: WILLIAMS, SARAH
Address: 10874 SKYLARK MANOR CT.
City-St-Zip: JACKSONVILLE, FL 32257

Title: STD (X) Change ( ) Addition
Name: WHITEHEAD, WILLIAM R
Address: 4165 OLD MILL COVE TRAIL
City-St-Zip: JACKSONVILLE, FL 32277

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: CARL WILLIAMS PD 04/16/2003

Electronic Signature of Signing Officer or Director — Date