2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2009
Secretary of State

DOCUMENT# P02000088473

Entity Name: COASTAL INDUSTRIES & ROOFING, INC.

Current Principal Place of Business:

17350 73RD COURT NORTH
LOXAHATCHEE, FL 33470

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 211212
WEST PALM BEACH, FL 334211212

New Mailing Address:

P.O. BOX 211212
WEST PALM BEACH, FL 334211212 US

FEI Number: 90-0043073 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SANDERS, BARRY
17350 73RD COURT N
LOXAHATCHEE, FL 33470 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: P ( ) Delete
Name: SANDERS, BARRY
Address: 17350 73RD COURT N
City-St-Zip: LOXAHATCHEE, FL 33470

Title: ST ( ) Delete
Name: ARNOLD, DANIEL J
Address: 376 SUMMER COVE CIRCLE
City-St-Zip: ST. AUGUSTINE, FL 32086

Title: VP (X) Delete
Name: SANDERS, DONNA C
Address: 17350 73RD COURT N
City-St-Zip: LOXAHATCHEE, FL 33470

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: ST (X) Change ( ) Addition
Name: SANDERS, DONNA COLE
Address: 17350 73RD CT. N
City-St-Zip: LOXAHATCHEE, FL 33470

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: DONNA SANDERS ST 04/26/2009

Electronic Signature of Signing Officer or Director — Date