2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000086204

City-St-Zip:

VENICE, FL 34285

Entity Name: COASTAL INSURANCE ALLIANCE, INC.

FILED Mar 23, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:		
200 E. VE VENICE, I	NICE AVE., ST FL 34285	ГЕ. 304			
Current Mailing Address:			New Mailing Address:		
200 E. VE VENICE, I	NICE AVE., ST FL 34285	ГЕ. 304			
FEI Number	r: 80-0074049	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	d Address of (Current Registered Agent:	Name and Address of	Name and Address of New Registered Agent:	
200 E. VE	L, JOHN C NICE AVE., ST FL 34285 L				
	e named entity e of Florida.	submits this statement for the	purpose of changing its registered	office or registered agent, or both,	
SIGNATU	RE:				
	Electro	nic Signature of Registered Ag	ent	Date	
Election Ca	mpaign Financin	g Trust Fund Contribution ().			
OFFICER	S AND DIREC	TORS:	ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name:	BRITNELL, JO) Delete HN C	Title: Name:	() Change () Addition	

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: JOHN CLARKE BRITNELL PRES 03/23/2009