

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000156945

FILED
Aug 25, 2008
Secretary of State

Entity Name: INTERCOASTAL COATING SYSTEMS, INC

Current Principal Place of Business:

4416 100TH STREET
BRADENTON, FL 34210

New Principal Place of Business:

Current Mailing Address:

4416 100TH STREET
BRADENTON, FL 34210

New Mailing Address:

FEI Number: 20-0590511

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BIRKHOLO, CINDY
512 N ORANGE AVE
SARASOTA, FL 34236 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: BOYKIN, DALE
Address: 5120 14TH ST, LOT 119
City-St-Zip: BRADENTON, FL 34207

Title: D () Delete
Name: BOYKIN, MICHAEL
Address: 2015 57TH AVE W
City-St-Zip: BRADENTON, FL 34207

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: DALE BOYKIN

D

08/25/2008

Electronic Signature of Signing Officer or Director

_____ Date