

# 2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000083061

**FILED**  
**Mar 02, 2007**  
**Secretary of State**

**Entity Name:** COASTLINE RESIDENTIAL APPRAISALS, INC.

**Current Principal Place of Business:**

5301 N. FEDERAL HWY  
SUITE 335  
BOCA RATON, FL 33487

**New Principal Place of Business:**

3844 NW 4TH COURT  
BOCA RATON, FL 33431

**Current Mailing Address:**

5301 N. FEDERAL HWY  
SUITE 335  
BOCA RATON, FL 33487

**New Mailing Address:**

3844 NW 4TH COURT  
BOCA RATON, FL 33431

FEI Number: 20-1191885

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

MAMMANO, THOMAS  
5301 N. FEDERAL HWY  
SUITE 335  
BOCA RATON, FL 33487 US

**Name and Address of New Registered Agent:**

MAMMANO, THOMAS M PRES  
3844 NW 4TH COURT  
BOCA RATON, FL 33431 US

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: THOMAS M MAMMANO

03/02/2007

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: P ( ) Delete  
Name: MAMMANO, THOMAS  
Address: 5301 N. FEDERAL HWY, SUITE 335  
City-St-Zip: BOCA RATON, FL 33487

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: MAMMANO, THOMAS M  
Address: 3844 NW 4TH COURT  
City-St-Zip: BOCA RATON, FL 33487

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: THOMAS M MAMMANO

P

03/02/2007

Electronic Signature of Signing Officer or Director

Date