

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000100431

FILED
Apr 30, 2009
Secretary of State

Entity Name: COASTLINE LENDING CORP.

Current Principal Place of Business:

4040 WOODCOCK DRIVE
151
JACKSONVILLE, FL 32207

New Principal Place of Business:

2214 UNIVERSITY BLVD W
JACKSONVILLE, FL 32217

Current Mailing Address:

4040 WOODCOCK DRIVE
151
JACKSONVILLE, FL 32207

New Mailing Address:

2214 UNIVERSITY BLVD W
JACKSONVILLE, FL 32217

FEI Number: 20-1329795

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JOHANSON, KIRK M
4040 WOODCOCK DRIVE
151
JACKSONVILLE, FL 32207 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: BROWN, JUSTIN L
Address: 2620 LYNNHAVEN TERRACE
City-St-Zip: JACKSONVILLE, FL 32223

Title: VP () Delete
Name: JOHANSON, KIRK M
Address: 2207 SEGOVIA AVENUE
City-St-Zip: JACKSONVILLE, FL 32217

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: KIRK JOHANSON

VP

04/30/2009

Electronic Signature of Signing Officer or Director

Date