

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000125664

FILED
Apr 26, 2007
Secretary of State

Entity Name: MARITIME COASTAL DEVELOPMENT CORP.

Current Principal Place of Business:

2120 US 1 SOUTH
STE 115
ST AUGUSTINE, FL 32086 US

New Principal Place of Business:

Current Mailing Address:

11 CINCINNATI AVE.
ST AUGUSTINE, FL 32084 US

New Mailing Address:

FEI Number: 32-0125414

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BRACKETT, ROBERT
29 CUNA ST
ST AUGUSTINE, FL 32084 US

Name and Address of New Registered Agent:

BRACKETT, ROBERT
11 CINCINNATI AVE.
ST AUGUSTINE, FL 32084 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: ROBERT BRACKETT

04/26/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BRACKETT, ROBERT
Address: 29 CUNA ST
City-St-Zip: ST AUGUSTINE, FL 32084

Title: VPT () Delete
Name: BRACKETT, SHERRI
Address: 29 CUNA ST
City-St-Zip: ST AUGUSTINE, FL 32084

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BRACKETT, ROBERT
Address: 11 CINCINNATI AVE.
City-St-Zip: ST AUGUSTINE, FL 32084

Title: VPT (X) Change () Addition
Name: BRACKETT, SHERRI
Address: 11 CINCINNATI AVENUE
City-St-Zip: ST AUGUSTINE, FL 32084

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: ROBERT BRACKETT

P

04/26/2007

Electronic Signature of Signing Officer or Director

Date