

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000161530

FILED
Feb 16, 2005
Secretary of State

Entity Name: COASTAL MARINE OF NORTHEAST FLORIDA, INC.

Current Principal Place of Business:

1011 BULKHEAD ROAD
GREEN COVE SPRINGS, FL 32043

New Principal Place of Business:

960 BUNKER AVENUE
GREEN COVE SPRINGS, FL 32043

Current Mailing Address:

1011 BULKHEAD ROAD
GREEN COVE SPRINGS, FL 32043

New Mailing Address:

960 BUNKER AVENUE
GREEN COVE SPRINGS, FL 32043

FEI Number: 20-1997142

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JONES, RICHARD K
501 W. BAY STREET
JACKSONVILLE, FL 32202 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: D () Delete
Name: SMITH, AARON JOSEPH
Address: 1011 BULKHEAD ROAD
City-St-Zip: GREEN COVE SPRINGS, FL 32043

Title: D (X) Delete
Name: DRURY, JOHN J
Address: 1011 BULKHEAD ROAD
City-St-Zip: GREEN COVE SPRINGS, FL 32043

Title: D () Delete
Name: SMITH, AARON JOSEPH JR.
Address: 1011 BULKHEAD ROAD
City-St-Zip: GREEN COVE SPRINGS, FL 32043

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: SMITH, AARON JOSEPH
Address: 960 BUNKER AVENUE
City-St-Zip: GREEN COVE SPRINGS, FL 32043

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

Title: D (X) Change () Addition
Name: SMITH, AARON JOSEPH JR.
Address: 960 BUNKER AVENUE
City-St-Zip: GREEN COVE SPRINGS, FL 32043

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: AARON JOSEPH SMITH

D

02/16/2005

Electronic Signature of Signing Officer or Director

Date