

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000043199

Entity Name: COASTAL IMAGING, INC.

**FILED**  
**Apr 06, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

27511 LIPIZZAN TRAIL  
PUNTA GORDA, FL 33950

**New Principal Place of Business:**

**Current Mailing Address:**

27511 LIPIZZAN TRAIL  
PUNTA GORDA, FL 33950

**New Mailing Address:**

FEI Number: 20-2550411

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BOUCHER, LISA M  
27511 LIPIZZAN TRAIL  
PUNTA GORDA, FL 33950 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

**OFFICERS AND DIRECTORS:**

Title: DPST  
Name: BOUCHER, LISA M  
Address: 27511 LIPIZZAN TRAIL  
City-St-Zip: PUNTA GORDA, FL 33950

Title: V  
Name: BOUCHER, BERT  
Address: 27511 LIPIZZAN TRAIL  
City-St-Zip: PUNTA GORDA, FL 33950

I hereby 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 all other like empowered.

SIGNATURE: LISA BOUCHER

DPST

04/06/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date