

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000099718

Entity Name: COASTAL LOAN INC.

FILED  
May 01, 2008  
Secretary of State

## Current Principal Place of Business:

142 JASPER FLOYD ROAD  
PONCE DELEON, FL 32455

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 408  
DEFUNIAK SPRINGS, FL 32435

## New Mailing Address:

FEI Number: 20-3170840

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WATSON, P.A., FRANKLIN H  
5365 E. CO. HWY 30-A SUITE 105  
SEAGROVE BEACH, FL 32459 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

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: PRES ( ) Delete  
Name: CHAPMAN, WILLIAM N PRES.  
Address: 142 JASPER FLOYD ROAD  
City-St-Zip: PONCE DELEON, FL 32455 US

Title: VP ( ) Delete  
Name: CHAPMAN, MILDRED J V/PRES  
Address: 142 JASPER FLOYD ROAD  
City-St-Zip: PONCE DELEON, FL 32455 US

Title: SEC ( ) Delete  
Name: LAWSON, JULIE L SEC/TRE  
Address: 256 HWY 90 EAST  
City-St-Zip: DEFUNIAK SPRINGS, FL 32433 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: SEC (X) Change ( ) Addition  
Name: LAWSON, JULIE L SEC/TRE  
Address: P.O. BOX 408  
City-St-Zip: DEFUNIAK SPRINGS, FL 32435 US

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: WILLIAM N CHAPMAN

PRES

05/01/2008

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

\_\_\_\_\_  
Date