2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 05, 2007
Secretary of State

DOCUMENT# P05000149940

Entity Name: COASTAL LIQUORS I, INC

Current Principal Place of Business:

13639 LEGENDS WALK TERRACE
BRADENTON, FL 34202

New Principal Place of Business:

8314 MARKET STREET
BRADENTON, FL 34202

Current Mailing Address:

13639 LEGENDS WALK TERRACE
BRADENTON, FL 34202

New Mailing Address:

8314 MARKET STREET
BRADENTON, FL 34202

FEI Number: 20-3764781 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

KIRSHE, NANCY L
13639 LEGENDS WALK TERRACE
BRADENTON, FL 34202 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: PD ( ) Delete
Name: KIRSHE, MICHAEL S
Address: 13639 LEGENDS WALK TERRACE
City-St-Zip: BRADENTON, FL 34202

Title: VD ( ) Delete
Name: JENKINS, MARC
Address: 13639 LEGENDS WALK TERRACE
City-St-Zip: BRADENTON, FL 34202

Title: D (X) Delete
Name: PHILLIPS, ROSALIE L
Address: 13639 LEGENDS WALK TERRACE
City-St-Zip: BRADENTON, FL 34202

Title: TD ( ) Delete
Name: KIRSHE, KIMBERLY S
Address: 13639 LEGENDS WALK TERRACE
City-St-Zip: BRADENTON, FL 34202

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VD (X) Change ( ) Addition
Name: JENKINS, MARC
Address: 6610 CHICKADEE LANE
City-St-Zip: BRADENTON, FL 34202

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

Title: TD (X) Change ( ) Addition
Name: JENKINS, KIMBERLY S
Address: 6610 CHICKADEE LANE
City-St-Zip: BRADENTON, FL 34202

I hereby certify that the information supplied with this filing does not qualify for the 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: KIMBERLY S. JENKINS TD 01/05/2007
Electronic Signature of Signing Officer or Director Date