2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000164806

Entity Name: COASTAL BEACH SERVICE OF NWFL, INC.

FILED May 04, 2009 Secretary of State

Current Principal Place of Business:				New Prin	New Principal Place of Business:			
141 TIMBE DESTIN, F		US						
Current Mailing Address:				New Mail	New Mailing Address:			
141 TIMBE DESTIN, F		US						
FEI Number:	20-3955453	FE	El Number Applied For()	FEI Number Not App	plicable ()	Certificate of Status Desired (X)	
Name and	Address o	f Curre	ent Registered Agent:	Name and	Name and Address of New Registered Agent:			
141 TIMBE DESTIN, F The above	L 32541	US	nits this statement for the p	urpose of changing	its registere	ed office or registered agent, or b	ooth,	
SIGNATUF	RE:							
	Electr	onic S	ignature of Registered Age	nt		Date		
			b), F.S., the corporation did not ist Fund Contribution ().	receive the prior noti	ice.			
OFFICERS AND DIRECTORS:				ADDITIO	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	P FITZGERALI 141 TIMBER DESTIN, FL	CT	I R III	Title: Name: Address: City-St-Zip:		() Change () Addition		
Title: Name: Address: City-St-Zip:		() Dele	ete	Title: Name: Address: City-St-Zip:	141 TIMBE	() Change (X) Addition LD, KIMBERLY M :R COURT L 32511 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: KIMBERLY M. FITZGERALD VP 05/04/2009