

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000076922

FILED
Feb 08, 2008
Secretary of State

Entity Name: COASTAL SECURITY AND TECHNICAL SERVICES INC.

Current Principal Place of Business:

2913 GLENN ST
GULF BREEZE, FL 32563

New Principal Place of Business:

1946 ELODIE LANE
GULF BREEZE, FL 32563

Current Mailing Address:

2913 GLENN ST
GULF BREEZE, FL 32563

New Mailing Address:

1946 ELODIE LANE
GULF BREEZE, FL 32563

FEI Number: 71-1006380

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

A1A REGISTERED AGENT INC.
92 SADBERRY ROAD
QUINCY, FL 32351 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: DP () Delete
Name: WYROSDICK, TERRY M
Address: 2913 GLENN ST
City-St-Zip: GULF BREEZE, FL 32563

Title: VP () Delete
Name: COLEMAN, JARED R
Address: 2915 BROWDER STREET
City-St-Zip: GULFBREEZE, FL 32563

Title: T () Delete
Name: MCNEW, PATRICIA M
Address: 2913 GLENN STREET
City-St-Zip: GULF BREEZE, FL 32563

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: WYROSDICK, TERRY M
Address: 1946 ELODIE LANE
City-St-Zip: GULF BREEZE, FL 32563

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

Title: T (X) Change () Addition
Name: MCNEW, PATRICIA M
Address: 1946 ELODIE LANE
City-St-Zip: GULF BREEZE, FL 32563

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: TERRY M WYROSDICK

DP

02/08/2008

Electronic Signature of Signing Officer or Director

Date