

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P06000128769

Entity Name: COASTAL ISLANDS, INC.

**FILED**  
**Jan 15, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

36 LAUREL STREET  
CLEARWATER BEACH, FL 33767

**New Principal Place of Business:**

**Current Mailing Address:**

36 LAUREL STREET  
CLEARWATER BEACH, FL 33767

**New Mailing Address:**

FEI Number: 20-5814168

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

JONASSEN, WILLIAM S  
36 LAUREL STREET  
CLEARWATER BEACH, FL 33767 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: D  
Name: JONASSEN, WILLIAM S  
Address: 1446 COURT STREET  
City-St-Zip: CLEARWATER, FL 33756

Title: P  
Name: FITZSIMMONS, TIM  
Address: 7092 PLACIDA ROAD  
City-St-Zip: CAPE HAZE, FL 33946

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: WILLIAM JONASSEN

D

01/15/2010

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

\_\_\_\_\_  
Date