

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000096050

FILED
Apr 29, 2009
Secretary of State

Entity Name: COASTAL PALMS & LANDSCAPING, INC.

Current Principal Place of Business:

755 26 AVE. N.
ST. PETERSBURG, FL 33704

New Principal Place of Business:

Current Mailing Address:

PO BOX 41554
ST. PETERSBURG, FL 33743

New Mailing Address:

FEI Number: 45-0573319

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALBRIGHT, LISA M
5353 GULF BLVD., B202
ST. PETE BEACH, FL 33706 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: P () Delete
Name: ALBRIGHT, DANIEL L
Address: 5353 GULF BLVD., B202
City-St-Zip: ST. PETE BEACH, FL 33706

Title: VP () Delete
Name: FRANCA, CRAIG F
Address: 755 26 AVE. N.
City-St-Zip: ST. PETERSBURG, FL 33704

Title: T () Delete
Name: ALBRIGHT, LISA M
Address: 5353 GULF BLVD., B202
City-St-Zip: ST. PETE BEACH, FL 33706

Title: S () Delete
Name: ALBRIGHT, LISA M
Address: 5353 GULF BLVD., B202
City-St-Zip: ST. PETE BEACH, FL 33706

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: ALBRIGHT, DANIEL L
Address: 5301 GULF BLVD., F303
City-St-Zip: ST. PETE BEACH, FL 33706

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

Title: T (X) Change () Addition
Name: ALBRIGHT, LISA M
Address: 5301 GULF BLVD., F303
City-St-Zip: ST. PETE BEACH, FL 33706

Title: S (X) Change () Addition
Name: ALBRIGHT, LISA M
Address: 5301 GULF BLVD., F303
City-St-Zip: ST. PETE BEACH, FL 33706

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: LISA ALBRIGHT

SEC

04/29/2009

Electronic Signature of Signing Officer or Director

Date