

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000010204

FILED
Apr 28, 2009
Secretary of State

Entity Name: COASTAL ELECTRONICS AND COMMUNICATIONS INC

Current Principal Place of Business:

13125 NORTH MAIN STREET
JACKSONVILLE, FL 32218

New Principal Place of Business:

10569 PINE ESTATES RD E
JACKSONVILLE, FL 32218

Current Mailing Address:

10569 PINE ESTATES RD EAST
JACKSONVILLE, FL 32218

New Mailing Address:

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FREEMAN, JIMMY
2260 CATHERINE COLLINS LANE
JACKSONVILLE, FL 32218 US

Name and Address of New Registered Agent:

FREEMAN, JIMMY
10569 PINE ESTATES RD E
JACKSONVILLE, FL 32218 US

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:

04/28/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: FREEMAN, JIMMY
Address: 2260 CATHERINE COLLINS LANE
City-St-Zip: JACKSONVILLE, FL 32218

Title: VP () Delete
Name: FREEMAN, WILLA
Address: 10569 PINE ESTATES RD EAST
City-St-Zip: JACKSONVILLE, FL 32218

Title: VP () Delete
Name: FREEMAN, JIMMY N
Address: 10569 PINE ESTATES RD EAST
City-St-Zip: JACKSONVILLE, FL 32218

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: FREEMAN, JIMMY
Address: 10569 PINE ESTATES RD E
City-St-Zip: JACKSONVILLE, FL 32218

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

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

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: JIMMY FREEMAN

P

04/28/2009

Electronic Signature of Signing Officer or Director

Date