

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000013269

FILED
Feb 19, 2009
Secretary of State

Entity Name: COASTAL BOOKKEEPING SERVICES, INC.

Current Principal Place of Business:

3814 LA FLOR DRIVE
ROCKLEDGE, FL 32955 US

New Principal Place of Business:

548 SOLITAIRE PALM DR.
INDIALANTIC, FL 32903 US

Current Mailing Address:

3814 LA FLOR DRIVE
ROCKLEDGE, FL 32955 US

New Mailing Address:

PO BOX 372218
SATELLITE BEACH, FL 32937 US

FEI Number: 80-0351763

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MILLER, CHRISTINE
3814 LA FLOR DRIVE
ROCKLEDGE, FL 32955 US

Name and Address of New Registered Agent:

MILLER, CHRISTINE
548 SOLITAIRE PALM DR.
INDIALANTIC, FL 32903 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:

02/19/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: MILLER, CHRISTINE
Address: 3814 LA FLOR DRIVE
City-St-Zip: ROCKLEDGE, FL 32955 US

Title: TRES () Delete
Name: MILLER, CHRISTINE
Address: 3814 LA FLOR DRIVE
City-St-Zip: ROCKLEDGE, FL 32955 US

Title: SECT () Delete
Name: MILLER, CHRISTINE
Address: 3814 LA FLOR DRIVE
City-St-Zip: ROCKLEDGE, FL 32955 US

Title: DIR () Delete
Name: MILLER, CHRISTINE
Address: 3814 LA FLOR DRIVE
City-St-Zip: ROCKLEDGE, FL 32955 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: MILLER, CHRISTINE
Address: 548 SOLITAIRE PALM DR.
City-St-Zip: INDIALANTIC, FL 32903 US

Title: TRES (X) Change () Addition
Name: MILLER, CHRISTINE
Address: 548 SOLITAIRE PALM DR.
City-St-Zip: INDIALANTIC, FL 32903 US

Title: SECT (X) Change () Addition
Name: MILLER, CHRISTINE
Address: 548 SOLITAIRE PALM DR.
City-St-Zip: INDIALANTIC, FL 32903 US

Title: DIR (X) Change () Addition
Name: MILLER, CHRISTINE
Address: 548 SOLITAIRE PALM DR.
City-St-Zip: INDIALANTIC, FL 32903 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: CHRISTINE M MILLER

PRES

02/19/2009

Electronic Signature of Signing Officer or Director

Date