

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P08000044077

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

**Entity Name:** COASTAL DESIGN OF BREVARD, INC.

**Current Principal Place of Business:**

555 THOMAS BARBOUR DRIVE  
MELBOURNE, FL 32935

**New Principal Place of Business:**

1213 MEADOW LAKE ROAD  
ROCKLEDGE, FL 32955

**Current Mailing Address:**

P O BOX 361157  
MELBOURNE, FL 32936

**New Mailing Address:**

1213 MEADOW LAKE ROAD  
ROCKLEDGE, FL 32955

**FEI Number:** 26-2530131

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CARY, ALLEN  
555 THOMAS BARBOUR DRIVE  
MELBOURNE, FL 32935 US

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

CARY, ALLEN  
1213 MEADOW LAKE ROAD  
ROCKLEDGE, FL 32955 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:**

04/15/2010

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** CARY, ALLEN  
**Address:** 1213 MEADOW LAKE ROAD  
**City-St-Zip:** ROCKLEDGE, FL 32955

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:** ALLEN CARY

P

04/15/2010

Electronic Signature of Signing Officer or Director

Date