

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P08000058984

**FILED**  
**Apr 26, 2011**  
**Secretary of State**

**Entity Name:** COASTAL ACCOUNTANTS ADVISORY SERVICES, P.A.

**Current Principal Place of Business:**

3372 COVE ROAD  
JUPITER, FL 33469

**New Principal Place of Business:**

222 S. US HIGHWAY 1  
SUITE 7  
TEQUESTA, FL 33469

**Current Mailing Address:**

3372 COVE ROAD  
JUPITER, FL 33469

**New Mailing Address:**

222 S. US HIGHWAY 1  
SUITE 7  
TEQUESTA, FL 33469

**FEI Number:** 26-3523174

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

NANCY, JOHNSON  
3372 COVE ROAD  
JUPITER, FL 33469 US

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

VINIAR, ROBERT A  
222 S. US HIGHWAY 1  
SUITE 7  
TEQUESTA, FL 33469 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:** ROBERT A. VINIAR

04/26/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** VINIAR, ROBERT A  
**Address:** 222 S. US HIGHWAY 1 SUITE 7  
**City-St-Zip:** TEQUESTA, FL 33469 US

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:** ROBERT A. VINIAR

PRES

04/26/2011

Electronic Signature of Signing Officer or Director

Date