

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000091859

FILED
May 05, 2009
Secretary of State

Entity Name: INTERCOASTAL SOLUTIONS, INC.

Current Principal Place of Business:

2665 CASTILLA ISLE
FORT LAUDERDALE, FL 33301 US

New Principal Place of Business:

Current Mailing Address:

C/O SPACE SOURCE, INC., 169 MONROE AVE. NW
STE. 350
GRAND RAPIDS, MI 49503 US

New Mailing Address:

FEI Number: 26-3517726 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DYKGRAAF, DANIEL J
2665 CASTILLA ISLE
FORT LAUDERDALE, FL 33301 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BOUMA, DOUG
Address: 4101 ROGER B. CHAFFEE MEMORIAL DR.
City-St-Zip: GRAND RAPIDS, MI 49548 US

Title: SEC () Delete
Name: MILES, FRANK D
Address: 169 MONROE AVE. NW, STE. 350
City-St-Zip: GRAND RAPIDS, MI 49503 US

Title: TR () Delete
Name: DYKGRAAF, DANIEL J
Address: 2665 CASTILLA ISLE
City-St-Zip: FORT LAUDERDALE, FL 33301 US

Title: CH () Delete
Name: DYKGRAAF, DANIEL J
Address: 2665 CASTILLA ISLE
City-St-Zip: FORT LAUDERDALE, FL 33301 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: DOUG BOUMA

P

05/05/2009

Electronic Signature of Signing Officer or Director

_____ Date