

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000054918

FILED
Feb 25, 2010
Secretary of State

Entity Name: FLORIDA SHORES COASTAL, INC.

Current Principal Place of Business:

4525 OLD CANOE CREEK RD
ST CLOUD, FL 34769

New Principal Place of Business:

Current Mailing Address:

4525 OLD CANOE CREEK RD
ST CLOUD, FL 34769

New Mailing Address:

FEI Number: 27-0435409

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHOFFNER, JACK A JR.
4525 OLD CANOE CREEK RD
ST CLOUD, FL 34769 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRES
Name: SHOFFNER, JACK A JR.
Address: 4525 OLD CANOE CREEK ROAD
City-St-Zip: ST CLOUD, FL 34769

Title: CHMN
Name: SMITH, BENJAMIN A III
Address: 4525 OLD CANOE CREEK ROAD
City-St-Zip: ST CLOUD, FL 34769

Title: CFO
Name: KAPER, NORLAN D
Address: 4525 OLD CANOE CREEK ROAD
City-St-Zip: ST CLOUD, FL 34769

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: NORLAN D KAPER

CFO

02/25/2010

Electronic Signature of Signing Officer or Director

Date