

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000000626

FILED  
Apr 20, 2012  
Secretary of State

**Entity Name:** COASTAL SHUTTERS AND STUFF, INC.

**Current Principal Place of Business:**

6236 ST. LUCIE BLVD  
FORT PIERCE, FL 34946

**New Principal Place of Business:**

**Current Mailing Address:**

6236 ST. LUCIE BLVD  
FORT PIERCE, FL 34946

**New Mailing Address:**

**FEI Number:** 80-0531907

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SKUBIC, ANGELA J  
6236 ST. LUCIE BLVD  
FORT PIERCE, FL 34946 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

**OFFICERS AND DIRECTORS:**

Title: D  
Name: SKUBIC, ANGELA J  
Address: 6236 ST. LUCIE BLVD  
City-St-Zip: FORT PIERCE, FL 34946

Title: DPT  
Name: SKUBIC, ANGELA J  
Address: 6236 ST. LUCIE BLVD  
City-St-Zip: FORT PIERCE, FL 34946

Title: DVS  
Name: SKUBIC, THOMAS  
Address: 6236 ST. LUCIE BLVD  
City-St-Zip: FORT PIERCE, FL 34946

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: ANGELA J SKUBIC

D

04/20/2012

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date