## 2002 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT# P40257

Entity Name: COASTAL CAISSON CORP.

FILED Aug 07, 2002 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
12290 U.S. HIGHWAY 19 NORTH CLEARWATER, FL 34624				12290 U.S. HIGHWAY 19 NORTH CLEARWATER, FL 33764			
Current Mailing Address:				New Mailing Address:			
12290 U.S. HIGHWAY 19 NORTH CLEARWATER, FL 34624				12290 U.S. HIGHWAY 19 NORTH CLEARWATER, FL 33764			
FEI Number	: 04-3163765	FEI Number Applied For()	FEI Nun	nber Not Appli	icable ( )	Certificate of Status Desired (X)	
Name and	Address of C	urrent Registered Agent:		Name and	Address	of New Registered Agent:	
1200 SOU PLANTATI The above	PORATION SYS TH PINE ISLAN ION, FL 33324 Inamed entity see of Florida.	ND ROAD US	urpose o	f changing it	s register	ed office or registered agent, or both,	
SIGNATU							
Electronic Signature of Registered Agent				 Date			
Election Car		satisfy its Intangible Tax filing requ g Trust Fund Contribution(). TORS:	iirement a		, ,	SES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	D () BAUER, THOM/ WITTELSBACH SCHROBENHAI	ERSTR. 5		Title: Name: Address: City-St-Zip:		( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D () TOSCHEMACH WITTELSBACH SCHROBENHAI	ERSTR. 5		Title: Name: Address: City-St-Zip:		( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D () BAUER, THOM/ WITTELSBACH SCHROBENHAI	ERSTR. 5		Title: Name: Address: City-St-Zip:		( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	VP () PUCCINI, CHAF 12290 US HIGH CLEARWATER	RLES IWAY 19 NORTH		Title: Name: Address: City-St-Zip:	PUCCINI, 12290 US	(X) Change()Addition CHARLES HIGHWAY 19 NORTH ATER, FL 33764	
Title: Name: Address: City-St-Zip:	P () WALSH, RICHA 12290 US HWY CLEARWATER	19N		Title: Name: Address: City-St-Zip:	VP WIKSTEN 12290 US CLEARWA	HWY 19N	
Title: Name: Address: City-St-Zip:	PARENT, RICH	IWAY 19 NORTH		Title: Name: Address: City-St-Zip:		( ) Change ( ) Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: RICHARD PARENT ST 08/07/2002