

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P40257

Entity Name: COASTAL CAISSON CORP.

FILED  
Feb 26, 2008  
Secretary of State

## Current Principal Place of Business:

13203 BYRD LEGG DR.  
ODESSA, FL 33556

## New Principal Place of Business:

## Current Mailing Address:

13203 BYRD LEGG DR.  
ODESSA, FL 33556

## New Mailing Address:

FEI Number: 04-3163765

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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: D ( ) Delete  
Name: BAUER, THOMAS,  
Address: WITTELSBACHERSTR. 5  
City-St-Zip: SCHROBENHAUSEN, GERMA,

Title: D ( ) Delete  
Name: TOSCHEMACHER, PETER,  
Address: WITTELSBACHERSTR. 5  
City-St-Zip: SCHROBENHAUSEN, GERMA,

Title: D ( ) Delete  
Name: BLISS, HANS-JOACHIM,  
Address: 12290 US HIGHWAY 19 NORTH  
City-St-Zip: CLEARWATER, FL 33764

Title: P ( ) Delete  
Name: PUCCINI, CHARLES  
Address: 12290 US HIGHWAY 19 NORTH  
City-St-Zip: CLEARWATER, FL 33764

Title: VP ( ) Delete  
Name: WIKSTEN, JON  
Address: 12290 US HIGHWAY 19 NORTH  
City-St-Zip: CLEARWATER, FL 33764

Title: ST ( ) Delete  
Name: WHELAN, PATRICK  
Address: 12290 US HIGHWAY 19 NORTH  
City-St-Zip: CLEARWATER, FL 33764

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D (X) Change ( ) Addition  
Name: BLISS, HANS-JOACHIM,  
Address: 13203 BYRD LEGG DR.  
City-St-Zip: ODESSA, FL 33556

Title: P (X) Change ( ) Addition  
Name: PUCCINI, CHARLES  
Address: 13203 BYRD LEGG DR.  
City-St-Zip: ODESSA, FL 33556

Title: VP (X) Change ( ) Addition  
Name: WIKSTEN, JON  
Address: 13203 BYRD LEGG DR.  
City-St-Zip: ODESSA, FL 33556

Title: ST (X) Change ( ) Addition  
Name: JOHNSON, JAMES C  
Address: 13203 BYRD LEGG DR.  
City-St-Zip: ODESSA, FL 33556

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: JAMES C. JOHNSON

ST

02/26/2008

Electronic Signature of Signing Officer or Director

Date