

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000085823

FILED
Jan 28, 2008
Secretary of State

Entity Name: COASTAL CARRIERS, INC.

Current Principal Place of Business:

125 RAILROAD AVE.
POLK CITY, FL 33868 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 90
KINGSTON, NH 03848 US

New Mailing Address:

FEI Number: 06-1388152

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHAMBERLAIN, IAN S
125 RAILROAD AVE.
POLK CITY, FL 33868 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: PCEO () Delete
Name: CHAMBERLAIN, IAN S
Address: P.O. BOX 90
City-St-Zip: KINGSTON, NH 03848 90

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PCEO (X) Change () Addition
Name: CHAMBERLAIN, IAN S P/CEO
Address: P.O. BOX 90
City-St-Zip: KINGSTON, NH 03848 90

Title: PRES () Change (X) Addition
Name: CHAMBERLAIN, IAN S PRES
Address: P.O. BOX 90
City-St-Zip: KINGSTON, NH 03848 US

Title: VP () Change (X) Addition
Name: CHAMBERLAIN, IAN S VP
Address: P.O. BOX 90
City-St-Zip: KINGSTON, NH 03848 US

Title: SEC () Change (X) Addition
Name: CHAMBERLAIN, IAN S SEC
Address: P.O. BOX 90
City-St-Zip: KINGSTON, NH 03848 US

Title: TREA () Change (X) Addition
Name: CHAMBERLAIN, IAN S TREAS
Address: P.O. BOX 90
City-St-Zip: KINGSTON, NH 03848 US

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: IAN S. CHAMBERLAIN

PCEO

01/28/2008

Electronic Signature of Signing Officer or Director

Date