

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000019924

FILED
Apr 22, 2004
Secretary of State

Entity Name: COASTAL HOMES OF FLORIDA, INC.

Current Principal Place of Business:

39 TREASURE CIRCLE
SEBASTIN, FL 32958

New Principal Place of Business:

5865 PINE RIDGE CIRCLE
VERO BEACH, FL 32967

Current Mailing Address:

39 TREASURE CIRCLE
SEBASTIN, FL 32958

New Mailing Address:

5865 PINE RIDGE CIRCLE
VERO BEACH, FL 32967

FEI Number: 59-3254157

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PAQUETTE, PIERRE
39 TREASURE CIRCLE
SEBASTIN, FL 32958

Name and Address of New Registered Agent:

PAQUETTE, PIERRE
5865 PINE RIDGE CIRCLE
VERO BEACH, FL 32967

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:

04/22/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: PAQUETTE, CHRISTIAN
Address: 39 TREASURE CIR
City-St-Zip: SEBASTIAN, FL 32958

Title: DS () Delete
Name: PAQUETTE, PIERRE
Address: 39 TREASURE CIRCLE
City-St-Zip: SEBASTIN, FL 32958

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: PAQUETTE, CHRISTIAN
Address: 5865 PINE RIDGE CIRCLE
City-St-Zip: VERO BEACH, FL 32967

Title: DS (X) Change () Addition
Name: PAQUETTE, PIERRE
Address: 5865 PINE RIDGE CIRCLE
City-St-Zip: VERO BEACH, FL 32967

Title: DV () Change (X) Addition
Name: ST-ONGE, THERESE
Address: 5865 PINE RIDGE CIRCLE
City-St-Zip: VERO BEACH, FL 32967

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: CHRISTIAN PAQUETTE

DP

04/22/2004

Electronic Signature of Signing Officer or Director

Date