

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 05, 2003 8:00 am
Secretary of State

05-05-2003 91878 036 ***150.00

DOCUMENT # P94000029010

1. Entity Name
COAST 2 COAST MANAGEMENT, INC.



Principal Place of Business
**1254 SOUTH JOHN PARKWAY
KISSIMMEE, FL 34741 US**

Mailing Address
**1254 SOUTH JOHN PARKWAY
KISSIMMEE, FL 34741 US**

2. Principal Place of Business
**1232 SOUTH JOHN YOUNG PARKWAY
Suite, Apt. #, etc.**

3. Mailing Address
**P.O. BOX 421444
Suite, Apt. #, etc.**



☐ CHECK HERE IF MAKING CHANGES

City & State
Kissimmee, FLORIDA
Zip
34741
Country
USA

City & State
Kissimmee, FLORIDA
Zip
34742
Country
USA

4. FEI Number
59-3269983
Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

**ARCHER, BRYNLEY B.
1254 SOUTH JOHN PARKWAY
KISSIMMEE, FL 34741**

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number Is Not Acceptable)
**1232 SOUTH JOHN YOUNG PARKWAY
City Kissimmee FL Zip Code 34741**

8. 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. I am familiar with, and accept the obligations of, registered agent.

SIGNATURE

[Signature]

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when replacing)

DATE

04/29/03

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD ARCHER, LIANE T 1248 S JOHN YOUNG PARKWAY KISSIMMEE, FL 34741 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD ARCHER, BRYNLEY 1248 S JOHN YOUNG PARKWAY KISSIMMEE, FL 34741 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD ARCHER, LIANE T 1232 S-JOHN YOUNG PARKWAY Kissimmee, FLORIDA 34741 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD ARCHER, BRYNLEY 1232 S. JOHN YOUNG PARKWAY Kissimmee, FLORIDA, 34741 ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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 507, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

[Signature]

L.T. ARCHER PRESIDENT

Date

4/29/03 407-944-0022

Daytime Phone #

CR2E034 (10/02)