2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P95000035416

1. Entity Name

COASTAL CONSTRUCTION GROUP, INC.



Principal Place of Business

Mailing Address

310 10TH AVE N

SUITE B

SAFETY HARBOR, FL 34695 US

P.O. BOX 21611 TAMPA, FL 33623

23 US

FILED Mar 02, 2007 8:00 am Secretary of State

03-02-2007 90014 016 ***150.00



DO NOT WRITE IN THIS SPACE

02122007 No Chg-P CR2E034 (11/05)

4. FEI Number Applied For

59-3311330

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

VOGT, JEFFREY D 310 10TH AVE N SAFETY HARBOR, FL 34695

DO NOT WRITE IN THIS SPACE

SAILITI				IN TH	IS SPACE
	named entity submits this statement for the prions of registered agent.	Lurpose of changing its registere	d office or re	egistered agent, or both, in the	ne State of Florida. † am familiar with, and accept
SIGNATURE	Signature, typed or printed name of registered agent and stitle if	applicable (NOTE, Registered	Agen) signature	required when reinstating)	DATE
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		Election Campaign Finance Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	TORS		L	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP VOGT, JEFFREY D 310 10TH AVE N SAFETY HARBOR, FL 34695				
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO N	OT WRITE
TITLE NAME STREET ADDRESS CITY-SI-ZIP				IN TH	IS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE			. ,		

12. Thereby certify that the information supplied with this filling does not quality for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an ardress, with all other like empowered.

SIGNATURE:

STREET ADDRESS

SIGNATURE AND TYPED OR PR

NTED NAME OF SIGNING OFFICER OR DIRECTOR

02/28/07

669 2514