

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P95000055350

**FILED**  
**Jan 10, 2012**  
**Secretary of State**

**Entity Name:** "COASTAL SAILING ADVENTURES INC."

**Current Principal Place of Business:**

OCEANSIDE MARINA #687  
KEY WEST, FL 33040

**New Principal Place of Business:**

**Current Mailing Address:**

28555 JOLLY ROGERS DR  
SUMMERLAND KEY, FL 33042

**New Mailing Address:**

**FEI Number:** 65-0603774

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

DUKE, JOHN  
28555 JOLLY ROGER DR  
SUMMERLAND KEY, FL 33042 US

**Name and Address of New Registered Agent:**

DUKE, JOHN O  
28555 JOLLY ROGER DR  
SUMMERLAND KEY, FL 33042 US

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: JOHN O DUKE

01/10/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: DUKE, JOHN O  
Address: 28555 JOLLY ROGER DR  
City-St-Zip: SUMMERLAND KEY, FL 33042

Title: VP  
Name: DUKE, BEATRIZ A  
Address: 28555 JOLLY ROGER DR  
City-St-Zip: SUMMERLAND KEY, FL 33042

I hereby 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 all other like empowered.

SIGNATURE: JOHN O DUKE

PRES

01/10/2012

Electronic Signature of Signing Officer or Director

Date