2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000071870

FILED Apr 10, 2006 Secretary of State

Entity Name: COASTAL DEVELOPMENT OF NORTH FLORIDA, INC. **Current Principal Place of Business: New Principal Place of Business:** ONE INDEPENDENT DR, STE. 1700 JACKSONVILLE, FL 32202 **Current Mailing Address: New Mailing Address:** ONE INDEPENDENT DR, STE. 1700 JACKSONVILLE, FL 32202 FEI Number: 59-3337102 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: TOOMEY, RICHARD J ONE INDÉPENDENT DR, STE. 1700 JACKSONVILLE, FL 32202 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition TOOMEY, RICHARD J Name: Name: ONE INDEPENDENT DR, STE. 1700 Address: Address: City-St-Zip: JACKSONVILLE, FL 32202 US City-St-Zip: Title: VΡ Title: () Delete (X) Change () Addition Name: PICKETT, BRETT Name: PICKETT, BRETT 915 N 4TH AVE 124 20TH AVE NRTH Address: Address: JACKSONVILLE BEACH, FL 32250 JACKSONVILLE BEACH, FL 32250 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutés. 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.

VΡ SIGNATURE: BRETT PICKETT 04/10/2006