2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **P96000051256** COASTAL FINANCE CORPORATION IV FILED 00 SFP 12 PM 3: 29 Mailing Address Principal Place of Business SECRETARY OF STATE 5310 NW 33RD AVE 5310 NW 33RD AVE TALLAHASSEE FLORIDA SUITE 114 SUITE 114 FT. LAUDERDALE FL 33309 FT. LAUDERDALE FL 33309 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 01-6343456 Not Applicable Country Zip Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name LIPPMAN, STEVEN N Street Address (P.O. Box Number is Not Acceptable) 1 FINANCIAL PLAZA #2308 FT. LAUDERDALE FL 33394 Zip Code FL 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After SEPTEMBER 13, 2000 Min. will be \$750.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. 12. ☐ Change ☐ Addition ☐ Delete TITLE TITLE DEAN. DEXTER W NAME NAME STREET ADDRESS 4750 LEITNER DR STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CORAL SPRINGS FL 33067 Change TITLE ☐ Delete Addition DEAN, JEAN NAME NAME 900003392339----09/13/00--01097--001 STREET ADDRESS 4750 LEITNER DR STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CORAL SPRINGS FL 33607 ****900.00-TITLE ☐ Delete TITLE ROSANSKY, JEFFREY NAME NAME STREET ADDRESS STREET ADDRESS 10111 NW 21 CT. CITY-ST-ZIP CITY-ST-ZIP SUNRISE FL 33322 ☐ Change ☐ Addition Delete TITLE TITLE MCCREERY, TERRIE NAME NAME STREET ADDRESS 21540 KAPOK CIR. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **BOCA RATON FL** ☐ Change ☐ Addition Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Defete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP

SIGNATURE:





• Los Angeles • New York • Miami

9/11/00

Ms. Katherine Harris Secretary of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Dear Ms. Harris;

I just received these notices for Corporate filing Friday 9/8/00. I only received three and as you can see I have made copies of the ones that I had filed last year and updated those. I am asking that the late fee be abated and that the copies that I have sent are acceptable. If they are not please sending new Business Reports and I will fill out the new ones for Coastal Finance Corp II, III and V.

Your cooperation in this matter will be greatly appreciated. I would like to make sure that the above corporations are still on the active status role. Thanking you in advance.

Very truly yours;

Jeffrey Rosansky

Assistant Secretary/ Controller