

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000010825

Entity Name: COASTAL HOMES, INC.

FILED
Apr 20, 2005
Secretary of State

Current Principal Place of Business:

6152 BARBARA DRIVE
SEFFNER, FL 33584

New Principal Place of Business:

1846 DEL ROBLES DRIVE
CLEARWATER, FL 33764

Current Mailing Address:

6152 BARBARA DRIVE
SEFFNER, FL 33584

New Mailing Address:

P O BOX 7215
CLEARWATER, FL 33758

FEI Number: 59-3424149

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BEARD, JAMES B
6152 BARBARA DRIVE
SEFFNER, FL 33584 US

Name and Address of New Registered Agent:

BEARD, JAMES B
1846 DEL ROBLES DRIVE
CLEARWATER, FL 33764 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: JAMES B. BEARD

04/20/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: BEARD, JAMES B
Address: 6152 BARBARA DRIVE
City-St-Zip: SEFFNER, FL 33584

Title: SD (X) Delete
Name: BEARD, RONALD E
Address: 6152 BARBARA DRIVE
City-St-Zip: SEFFNER, FL 33584

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: BEARD, JAMES B
Address: 1846 DEL ROBLES DRIVE
City-St-Zip: CLEARWATER, FL 33764

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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.

SIGNATURE: JAMES B. BEARD

PD

04/20/2005

Electronic Signature of Signing Officer or Director

Date