

2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 05, 2006 8:00 am
Secretary of State

05-05-2006 90193 043 ***150.00

DOCUMENT # P97000066901

1. Entity Name

COASTAL WATERPROOF CHARTS, INC.



Principal Place of Business

1756 CENTRAL AVE
SAINT PETERSBURG FL 33712
US

Mailing Address

1756 CENTRAL AVE
SAINT PETERSBURG FL 33712
US

2. Principal Place of Business

16 18TH ST. S.
Suite, Apt. #, etc.

3. Mailing Address

P.O. BOX 10265
Suite, Apt. #, etc.

City & State

ST. PETERSBURG, FL

City & State

ST. PETERSBURG, FL

Zip

33712

Country

US

Zip

33733

Country

US

4. FEI Number

59-3484993

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

1st MOORE

CR2E034 (10/05)



6. Name and Address of Current Registered Agent

BUFFINGTON, LINDA
1756 CENTRAL AVE
SAINT PETERSBURG FL 33712

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

16 18TH ST. S.

City

ST. PETERSBURG

FL

Zip Code

33712

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. I am familiar with, and accept the obligations of registered agent. LINDA BUFFINGTON

SIGNATURE

Linda Buffington

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

4/24/06

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2006 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE ☐ Delete
NAME P
STREET ADDRESS LINDA BUFFINGTON
CITY-ST-ZIP 1756 CENTRAL AVE
SAINT PETERSBURG FL 33712

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 16 18TH ST. S.
CITY-ST-ZIP ST. PETERSBURG, FL 33712

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 address, with all other like empowered.

SIGNATURE:

Linda Buffington LINDA BUFFINGTON 4/24/06 727 823-9248

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #