## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P98000052245

JOHNSON, R. PAUL

3898 S. TROPICAL TR

MERRITT ISLAND, FL 32952

Name:

Address:

City-St-Zip:

Entity Name: COASTAL BANCORPORATION INC

FILED Jan 07, 2008 Secretary of State

Entity Nar	me: COASTA	AL BANCORPORATION, INC.					
Current Principal Place of Business:			New Princ	New Principal Place of Business:			
	TH COURTE ISLAND, FL	NAY PARKWAY 32953					
Current M	lailing Addre	ss:	New Maili	New Mailing Address:			
2105 NORTH COURTENAY PARKWAY MERRITT ISLAND, FL 32953			1701 N ATLANTIC AVENUE COCOA BEACH, FL 32931				
FEI Number:	: 59-3540872	FEI Number Applied For ( )	FEI Number Not Appl	icable ( )	Certificate of Status De	esired ( )	
Name and	Address of	Current Registered Agent:	Name and	Name and Address of New Registered Agent:			
2105 NOR	, DOUGLAS F TH COURTE ISLAND, FL	NAY PARKWAY					
	named entity e of Florida.	submits this statement for the	e purpose of changing i	ts registered o	ffice or registered ago	ent, or both,	
SIGNATUR	RE:						
	Electro	nic Signature of Registered A	gent		Date		
Election Car	npaign Financii	ng Trust Fund Contribution ( ).					
OFFICERS	S AND DIREC	CTORS:	ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	D ( FREEDLE, P. 4224 BAY TO TAMPA, FL 3	BAY BLVD	Title: Name: Address: City-St-Zip:	( )	Change ( ) Addition		
Title: Name: Address: City-St-Zip:	TUCKER, ROI 8321 ALLWO		Title: Name: Address: City-St-Zip:	( )	Change ( ) Addition		
Title: Name: Address: City-St-Zip:	D ( LEUGERS, GI 4224 BAY TO TAMPA, FL 3	BAY BLVD	Title: Name: Address: City-St-Zip:	D (X) JOHNSON, R P 520 JILLOTUS MERRITT ISLAI	STREET		
Title:	D ()	() Delete	Title:	( )	Change ( ) Addition		

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

Name:

Address:

City-St-Zip:

SIGNATURE: R. PAUL JOHNSON D 01/07/2008