

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000104647

Entity Name: COASTAL RESTORATION, INC.

FILED
Apr 18, 2009
Secretary of State

Current Principal Place of Business:

6536 EAST BAY BLVD.
GULF BREEZE, FL 32563

New Principal Place of Business:

10132 BITTERN DRIVE
PENSACOLA, FL 32507

Current Mailing Address:

6536 EAST BAY BLVD.
GULF BREEZE, FL 32563

New Mailing Address:

10132 BITTERN DRIVE
PENSACOLA, FL 32507

FEI Number: 59-3619407

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ATKINSON, DEBRA
6536 EAST BAY BLVD.
GULF BREEZE, FL 32563 US

Name and Address of New Registered Agent:

BARTKOWSKI, STACEY L
10132 BITTERN DRIVE
PENSACOLA, FL 32507 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: STACEY L. BARTKOWSKI

04/18/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: V () Delete
Name: ATKINSON, DEBRA
Address: 6536 EAST BAY BLVD.
City-St-Zip: GULF BREEZE, FL 32563

Title: P () Delete
Name: BARTKOWSKI, SCOTT
Address: 10132 BITTERN DRIVE
City-St-Zip: PENSACOLA, FL 32507

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: BARTKOWSKI, STACEY L
Address: 10132 BITTERN DRIVE
City-St-Zip: PENSACOLA, FL 32507

Title: CEO (X) Change () Addition
Name: BARTKOWSKI, SCOTT
Address: 10132 BITTERN DRIVE
City-St-Zip: PENSACOLA, FL 32507

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.

SIGNATURE: STACEY L. BARTKOWSKI

VP

04/18/2009

Electronic Signature of Signing Officer or Director

Date