

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S76888

FILED
Apr 18, 2007
Secretary of State

Entity Name: COASTAL DATA SOLUTIONS, INC.

Current Principal Place of Business:

6952 NW 5TH STREET
PLANTATION, FL 33317 US

New Principal Place of Business:

Current Mailing Address:

6952 NW 5TH STREET
PLANTATION, FL 33317 US

New Mailing Address:

FEI Number: 65-0283037

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FURNISH, DAVID W
6952 N.W. 5TH ST.
PLANTATION, FL 33317 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: FURNISH, DAVID W.,
Address: 6952 N.W. 5TH ST
City-St-Zip: PLANTATION, FL

Title: D () Delete
Name: FURNISH, FONDA G.,
Address: 6952 N.W. 5TH ST
City-St-Zip: PLANTATION, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: FURNISH, DAVID W
Address: 6952 N.W. 5TH ST
City-St-Zip: PLANTATION, FL

Title: VP (X) Change () Addition
Name: FURNISH, FONDA G
Address: 6952 N.W. 5TH ST
City-St-Zip: PLANTATION, FL

I hereby certify that the information supplied with this filing does not qualify for the 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: DAVID W FURNISH

PRES

04/18/2007

Electronic Signature of Signing Officer or Director

Date