2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 17, 2002 8:00 am
Secretary of State
04-17-2002 90143 041 ***150.00

000248 AV

DOCUMENT # L44842

1. Entity Name
COASTAL LANDSCAPES, INC.

Principal Place of Business	Mailing Address
372 PINEY ISLAND DR. C/O MORRIS B. WILLIAMS FERNANDINA BCH FL 32034 US	372 PINEY ISLAND DR. C/O MORRIS B. WILLAMS FERNANDINA BCH FL 32034 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address	
1417 Avery Road Suite 100		PO Box 8141	
Suite, Apt. #, etc. c/o Morris B. Williams		Suite, Apt. #, etc. c/o Morris B. Williams	
City & State Fernandina Beach, Florida		City & State Amelia Island, Florida	
Zip 32034	Country USA	Zip 32035	Country USA

4. FEI Number 59-2988499 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
WILLIAMS, MORRIS B 372 PINEY ISLAND DR. FERNANDINA BCH FL 32034	Name: Williams, Morris B. Street Address (P.O. Box Number is Not Acceptable): 325 Marsh Lakes Drive City: Fernandina Beach FL Zip Code: 32034

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.

SIGNATURE ______________________ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS $150.00
After May 1, 2002 Fee will be $550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSD WILLIAMS, MORRIS BRUCE 372 PINEY ISLAND DR. FERNANDINA BEACH FL ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSD Williams, Morris Bruce 325 Marsh Lakes Drive Fernandina Beach, FL 32034 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VTD LAMPE, WALTER M. 4440 MERRIMAC AVE. JACKSONVILLE FL ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

CR2E034 (9/01)

13. I hereby certify that the information supplied with this filing does not qualify 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Morris Bruce Williams 3/29/02 904-261-9348
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #