

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P02000069156

**Entity Name:** COASTAL CONSTRUCTION AND PETROLEUM SERVICES, INC.

**FILED**  
**Jul 20, 2016**  
**Secretary of State**  
**CC4148272227**

**Current Principal Place of Business:**

818 CANAL ST.  
JACKSONVILLE, FL 32209

**Current Mailing Address:**

818 CANAL ST.  
JACKSONVILLE, FL 32209 US

**FEI Number: 04-3693519**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

JIMERSON, CHARLES BESQ  
JIMERSON & COBB, P.A.  
701 RIVERSIDE PARK PLACE SUITE 302  
JACKSONVILLE, FL 32204 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title P  
Name LYNCKER, CAREY O  
Address 818 CANAL ST.  
City-State-Zip: JACKSONVILLE FL 32209

Title VP  
Name LYNCKER, CAREY OJR  
Address 818 CANAL ST.  
City-State-Zip: JACKSONVILLE FL 32209

Title T  
Name LYNCKER, CAROLYN Y  
Address 818 CANAL ST.  
City-State-Zip: JACKSONVILLE FL 32209

*I hereby 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 all other like empowered.*

**SIGNATURE: CAREY O LYNCKER, JR**

**VICE PRESIDENT**

**07/20/2016**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date