

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000069384

Entity Name: COASTAL HOME INSPECTION SERVICES, INC.

Current Principal Place of Business:

5870 MUSTANG CIR.
PORT ST. LUCIE, FL 34987

Current Mailing Address:

5870 MUSTANG CIR.
PORT ST. LUCIE, FL 34987

FEI Number: 20-3285990

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

STEPHENS, WILL HJR
5870 MUSTANG CIR.
PORT ST. LUCIE, FL 34987 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 PST
Name STEPHENS, WILL HJR
Address 5870 MUSTANG CIR.
City-State-Zip: PORT ST. LUCIE FL 34987

Title PST
Name STEPHENS, WILL HJR
Address 5870 MUSTANG CIRCLE
City-State-Zip: PORT SAINT LUCIE FL 34987

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: WILL STEPHENS

PRESIDENT

01/26/2014

Electronic Signature of Signing Officer/Director Detail

Date