

2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000011088

Entity Name: COASTAL CONSTRUCTION OF MIAMI, INC.**Current Principal Place of Business:**5959 BLUE LAGOON DRIVE SUITE 200
MIAMI, FL 33126**Current Mailing Address:**5959 BLUE LAGOON DRIVE SUITE 200
MIAMI, FL 33126**FEI Number:** 65-0802683**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MOYE, JAMES E JR.
5959 BLUE LAGOON DRIVE SUITE 200
MIAMI, FL 33126 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:** JAMES E. MOYE

03/28/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title TREASURER
Name ALDERMAN, KEN R
Address 5959 BLUE LAGOON DRIVE SUITE 200

City-State-Zip: MIAMI FL 33126

Title PRESIDENT
Name MURPHY, SEAN M
Address 5959 BLUE LAGOON DRIVE SUITE 200

City-State-Zip: MIAMI FL 33126

Title ASST. SECRETARY
Name PHILBRICK, LYNN
Address 5959 BLUE LAGOON DRIVE SUITE 200

City-State-Zip: MIAMI FL 33126

Title PRESIDENT
Name MURPHY, THOMAS C
Address 5959 BLUE LAGOON DRIVE SUITE 200

City-State-Zip: MIAMI FL 33126

Title CHAIRMAN
Name WHITEMAN, DANIEL E
Address 5959 BLUE LAGOON DRIVE SUITE 200

City-State-Zip: MIAMI FL 33126

Title SECRETARY
Name MOYE, JAMES E JR.
Address 5959 BLUE LAGOON DRIVE SUITE 200

City-State-Zip: MIAMI FL 33126

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: JAMES E MOYE**SECRETARY**

03/28/2019

Electronic Signature of Signing Officer/Director Detail

Date