

2019 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F18000000898

Entity Name: COALFIELD DEVELOPMENT CORPORATION**Current Principal Place of Business:**312 HALL ST
WAYNE, WV 25570**Current Mailing Address:**PO BOX 1133
WAYNE, WV 25570 US**FEI Number:** 26-3836207**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**REGISTERED AGENTS INC.
7901 4TH STREET NORTH
SUITE 300
ST.PETERSBURG, FL 33702 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	C
Name	CASTLE, LARRY
Address	PO BOX 1133
City-State-Zip:	WAYNE WV 25570

Title	VC
Name	HANN, ROBERT
Address	PO BOX 1133
City-State-Zip:	WAYNE WV 25570

Title	P
Name	DENNISON, BRANDON
Address	PO BOX 1133
City-State-Zip:	WAYNE WV 25570

Title	VP
Name	SARCONI, SAMUEL
Address	PO BOX 1133
City-State-Zip:	WAYNE WV 25570

Title	S
Name	THOMAS, CHARLES
Address	PO BOX 1133
City-State-Zip:	WAYNE WV 25570

Title	T
Name	HATFIELD, JOETTA
Address	PO BOX 1133
City-State-Zip:	WAYNE WV 25570

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: SAMUEL SARCONI

CFO

03/25/2019

Electronic Signature of Signing Officer/Director Detail_____
Date