2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 547533

City-St-Zip:

Entity Name: COASTAL CONSTRUCTION OF BREVARD, INC.

FILED Mar 04, 2002 8:00 AM Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
1222 N HARBOR CITY BLVD MELBOURNE, FL 32935 US				903 EAST NEW HAVEN AVENUE MELBOURNE, FL 32901 US			
Current Mailing Address:				New Mailing Address:			
	RBOR CITY B RNE, FL 32935			P. O. BOX MELBOUR	1047 NE, FL 32902	2 US	
FEI Number:	59-1769988	FEI Number Applied For()	FEI Nur	nber Not Appl	icable()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
RICE, JOHN B. 1222 NORTH HARBOR CITY BLVD MELBOURNE, FL 32935 US				RICE, JOHN B. 903 EAST NEW HAVEN AVENUE MELBOURNE, FL 32901 US			
	named entity s e of Florida.	submits this statement for t	the purpose o	of changing i	ts registered o	ffice or registered agent, or both	n,
SIGNATURE:				03/04/2002			
Electronic Signature of Registered Agent				Date			
		satisfy its Intangible Tax filing Trust Fund Contribution ().	g requirement a	and elects to o	do so (X).		
OFFICERS	S AND DIREC	TORS:		ADDITION	IS/CHANGES	TO OFFICERS AND DIRECTO)RS:
Title: Name: Address: City-St-Zip:	P () RICE, JOHN B., 3066 RIO BONI INDIALANTIC, F	TA ST		Title: Name: Address: City-St-Zip:	()	Change () Addition	
Title: Name: Address: City-St-Zip:	OUTLAW, BEVI 616 HIBISCUS			Title: Name: Address: City-St-Zip:	BOSWELL, DO	IDE STREET, N.E.	
Title: Name: Address:	()	Delete		Title: Name: Address:	RICE, ALLISON	Change (X) Addition I POINTE BOULEVARD, UNIT 203	

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

City-St-Zip:

ORLANDO, FL 32807

SIGNATURE: JOHN B. RICE P 03/04/2002