

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 680820

FILED  
Jan 18, 2011  
Secretary of State

Entity Name: COAST PUMP & SUPPLY CO., INC.

**Current Principal Place of Business:**

610 GROVELAND AVENUE  
VENICE, FL 342854613

**New Principal Place of Business:**

**Current Mailing Address:**

610 GROVELAND AVE.  
VENICE, FL 34285 US

**New Mailing Address:**

610 GROVELAND AVENUE  
VENICE, FL 342854613

FEI Number: 59-2014748

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

PHILLIPS, GORDON W  
610 GROVELAND AVE.  
VENICE, FL 34285 US

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

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

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: PHILLIPS, GORDON W.  
Address: 610 GROVELAND AVENUE  
City-St-Zip: VENICE, FL 34285

Title: S  
Name: PHILLIPS, HELEN A.  
Address: 610 GROVELAND AVENUE  
City-St-Zip: VENICE, FL 34285

Title: VD  
Name: PHILLIPS, MATTHEW  
Address: 610 GROVELAND AVE  
City-St-Zip: VENICE, FL 34285

Title: VD  
Name: PHILLIPS, MARK  
Address: 610 GROVELAND AVE  
City-St-Zip: VENICE, FL 34285

Title: VD  
Name: PHILLIPS, MITCHELL  
Address: 610 GROVELAND AVE  
City-St-Zip: VENICE, FL 34285

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: GORDON W PHILLIPS

PD

01/18/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date