

**LIMITED LIABILITY COMPANY
UNIFORM BUSINESS REPORT (UBR)**

FILED
Jun 04, 2002 8:00 am
Secretary of State

06-04-2002 90201 027 ****50.00

DOCUMENT # LO1 000015286 ✓

1. Entity Name

Coastal Utility Construction, LLC

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

410 N. Halifax Ave.

Suite, Apt. #, etc.

Suite E

City & State

Daytona Beach, FL

Zip

32118

Country

USA

3. Mailing Address

410 N. Halifax Ave.

Suite, Apt. #, etc.

Suite E

City & State

Daytona Beach, FL

Zip

32118

Country

USA

4. FEI Number

59-3757045

Applied For

☐ Not Applicable

5. Certificate of Status Desired ☐

**\$5.00 Additional
Fee Required**

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name Richard VanOrd

Street Address (P.O. Box Number is Not Acceptable) 1400 N. Atlantic Ave. #301

City Daytona Beach

FL

Zip Code 32118

**DO NOT WRITE
IN THIS SPACE**

8. 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

Richard VanOrd, Manager

Signature, typed or printed name of registered agent and title if applicable.

5123102

DATE

FEE IS \$50.00

**Make Check Payable to Department of State
DUE BY MAY 1**

9. MANAGING MEMBERS/MANAGERS

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

MGR
Richard VanOrd
1400 N. Atlantic Ave. #301
Daytona Beach, FL 32118

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

MGR
Kenneth Shepherd
3839 Cardinal St.
Daytona Beach Shores, FL 32127

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

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NAME

STREET ADDRESS

CITY-ST-ZIP

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

Richard VanOrd, Manager

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

5123102 (386) 257-4997

Date

Daytime Phone #

CR2E083B (12/01)