## 2002 UNIFORM BUSINESS REPORT (UBR) FILED DOCUMENT # N9300003415 Apr 22, 2002 8:00 am Secretary of State 1. Entity Name TAYLOR COASTAL UTILITIES, INC. 04-22-2002 90263 015 \*\*\*\*70.00 Principal Place of Business Mailing Address 21468 SANDPIPERS S. P.O. BOX 73 PERRY FL 32348 PERRY FL 32348 00072437 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Fine BluffRd. City & State Applied For 59-3192651 Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name MEISSNER, ROBERT W P.E. Street Address (P.O. Box Number is Not Acceptable) RT 2 BOX 203 2-1468 Sandpiper SANDPIPER ROAD, CEDAR ISLAND **PERRY FL 32347** 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing Make Check Payable to \$5.00 May Be FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Added to Fees Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE ☐ Change ☐ Addition TITLE ☐ Delete BEACH, TRAVIS NAME NAME RT 2 BOX 131 STREET ADDRESS STREET ADDRESS **PERRY FL 32347** CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE MOODY, JIM NAME NAME RT 2. BOX 18 STREET ADDRESS STREET ADDRESS **PERRY FL 32347** CITY-ST-ZIP CITY-ST-ZIP Floyd Ford 20610 Marina Road Addition Delete TITLE ☐ Change TITI F D MURPHY, LARRY NAME NAME RT\_2\_BOX\_165E\_ STREET ADDRESS STREET\_ADDRESS **PERRY FL 32347** CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition TOWLES, BETTY NAME NAME RT 2 BOX 244A STREET ADDRESS STREET ADDRESS **PERRY FL 32347** CITY-ST-7IP CITY-ST-ZIP STD SHOR TITLE Change ☐ Addition TITLE ☐ Delete BALLINGER, <del>BOBO</del>T NAME NAME RT 2, BOX 237 STREET ADDRESS STREET ADDRESS PERRY FL 32347 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITI F Change ☐ Addition MCKINNEY, MIKE NAME NAME P O BOX 1428 N/A STREET ADDRESS STREET ADDRESS PERRY FL 32348 CITY-ST-ZIP CITY-ST-ZIP 12. 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 or supplemental report is true and accurate and that my 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 of truspee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Melvin Bonden 203\_5\_HendryAva Perry, FL 32347 Robert N. Menson, 6 in inst Mg - 4-1-02