2003 NOT-FOR-PROFIT CORPORATION

Jan 10, 2003 8:00 am **UNIFORM BUSINESS REPORT (UBR)** Secretary of State DOCUMENT # N9300003415 1. Entity Name 01-10-2003 90055 026 ****61.25 TAYLOR COASTAL UTILITIES, INC. Principal Place of Business Mailing Address 1823 PINE BLUFF RD P.O. BOX 73 **PERRY FL 32348** PERRY FL 32348 2. Principal Place of Business 3. Mailing Address West Greens 59777 Suite, Apt. #, etc. THE CHECK HERE IF MAKING CHANGES City & State City & State 4. FEI Number 59-3192651 Applied For Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired lor Fee Required Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent MEISSNER, ROBERT W P.E. Street Address (P.O. Box Number is Not Acceptable) 21468 SANDPIPER SOUTH PERRY FL 32348 Zip Code 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. I am familiar with, and ac the obligations of registered agent. 9. Election Campaign Financing Make Check Payable to FILE NOW: FEE IS \$61.25 \$5.00 May Be Trust Fund Contribution. Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 ☐ Delete CR2E037 (10/02) TITLE ☐ Change ☐ Addition BEACH, TRAVIS NAME STREET ADDRESS RT 2 BOX 131 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **PERRY FL 32347** TITLE n. ☐ Delete ☐ Change Addition NAME MOODY, JIM NAME STREET ADDRESS RT 2. BOX 18 STREET ADDRESS CITY-ST-ZIP PERRY FL 32347 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition FORD. FLOYD NAME STREET ADDRESS 20610 MARINA RD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP PERRY FL 32348 TITLE ☐ Delete STD TITLE ☐ Addition NAME **TOWLES, BETTY** NAME STREET ADDRESS RT 2 BOX 244A STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP PERRY FL 32347 Delete TITLE STD TITLE ☐ Addition Danny Everett 34885 Byron Butler Pkw., Perry, FL 32348 NAME BALLINGER, BOB NAME STREET ADDRESS STREET ADDRESS RT 2, BOX 237 CITY-ST-ZIP CITY-ST-ZIP **PERRY FL 32347** TITLE **VD** ☐ Delete TITLE ☐ Change Addition NAME MCKINNEY, MIKE NAME STREET ADDRESS P O BOX 1428 N/A STREET ADDRESS CITY-ST-ZIE CITY-ST-ZIP **PERRY FL 32348**

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 or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

FILED

Attachments Doct 193000034157

TAYLOR COASTAL UTILITIES P.O. BOX 73 PERRY, FL. 32348 850-838-2674 FAX# 850-223-1552

ADDITIONAL DIRECTOR

FLOYD FORD 20610 MARINA RD. PERRY, FL. 32348