

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000003437

FILED
Mar 21, 2009
Secretary of State

Entity Name: COASTAL IRRIGATION, INC. OF SWF

Current Principal Place of Business:

208 WALDO AVE. NORTH
LEHIGH ACRES, FL 33971

New Principal Place of Business:

Current Mailing Address:

C/O JOHN M. WICKER
P.O. DRAWER 60205
FT. MYERS, FL 33906

New Mailing Address:

C/O JOHN M. WICKER, P.A.
P.O. DRAWER 60205
FT. MYERS, FL 33906

FEI Number: 01-0564358

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WICKER, JOHN M PA
12670 NEW BRITTANY BLVD., SUITE 101
FT. MYERS, FL 33907 US

Name and Address of New Registered Agent:

WICKER, JOHN M
12670 NEW BRITTANY BLVD., SUITE 101
FT. MYERS, FL 33907 US

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: JOHN M. WICKER

03/21/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSTD () Delete
Name: STALVEY, ROBERT E JR.
Address: 5571 HARBORAGE DR.
City-St-Zip: FT. MYERS, FL 33908

Title: VP () Delete
Name: STALVEY, ROBERT E III
Address: 2700 NE 2ND PLACE
City-St-Zip: CAPE CORAL, FL 33909

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPST (X) Change () Addition
Name: STALVEY, ROBERT E JR.
Address: 5571 HARBORAGE DR.
City-St-Zip: FT. MYERS, FL 33908

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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.

SIGNATURE: ROBERT E. STALVEY, JR.

DPST

03/21/2009

Electronic Signature of Signing Officer or Director

Date