2007 FOR PROFIT CORPORATION ANNUAL REPORT

Mar 23, 2007 8:00 am Secretary of State 03-23-2007 90005 012 ***150.00 **DOCUMENT # P04000020915** COASTAL PLUMBING & SEWER, INC. Principal Place of Business Mailing Address 40039715 **3010 KEATS DRIVE** 3010 KEATS DRIVE PENSACOLA, FL 32503 PENSACOLA, FL 32503 03152007 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 56-2439790 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DAVIS, MICHAEL W DO NOT WRITE 3010 KEATS DRIVE PENSACOLA, FL 32503 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE_ · Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 1 14 27 FILE NOW!!! FEE IS \$150.00 ... After May 1, 2007 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. 7 TITLE -DAVIS, MICHAEL W NAME 3010 KEATS DRIVE STREET ADDRESS CITY-ST-ZIP PENSACOLA, FL 32503 NAME STREET ADDRESS CITY-ST-7IP TITLE NAME -STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

CITY-ST-ZIP TITLE , NAME STREET ADDRESS CITY-ST-ZIP

FILED