2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000020533

Entity Name: MOORE & COATES CONSTRUCTION, INC.

FILED Jan 16, 2009 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Current Principal Place of Business: New Principal Place of Business:

1547 FLORIDA MANGO RD., N. 1547 FLORIDA MANGO RD., N.

BLDG 11, UNIT 2 BLDG 11, UNIT 3

WEST PALM BEACH, FL 33409 US WEST PÄLM BEACH, FL 33409 US

Current Mailing Address: New Mailing Address:

P O BOX 15454 P O BOX 1098

WEST PALM BEACH, FL 33416 DUNNELLON, FL 34430

FEI Number: 65-0397418 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of New Registered Agent: Name and Address of Current Registered Agent:

MOORE, JAMES B MOORE, JAMES B 1547 FLÓRIDA MANGO ROAD NORTH 1547 FLÓRIDA MANGO ROAD NORTH BLDG 11, UNIT 2 BLDG 11, UNIT 3 WEST PALM BEACH, FL 33409 US WEST PÁLM BEACH, FL 33409 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: JAMES B. MOORE 01/16/2009

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition

MOORE, JAMES B Name: Name: MOORE, JAMES B

734 SE ADAMS CT 1547 FLORIDA MANGO RD NO BLDG 11-3 Address: Address: City-St-Zip: PORT ST. LUCIE, FL 34984 City-St-Zip: WEST PALM BEACH, FL 33409

VΡ Title: Title: () Delete (X) Change () Addition Name: COATES, MATTHEW Name: COATES, MATTHEW

734 SE ADAMS CT 1547 FLORIDA MANGO RD NO BLDG 11-3 Address: Address: PORT ST. LUCIE, FL 34984 WEST PALM BEACH, FL 33409 City-St-Zip: City-St-Zip:

Title: Title: STD STD

(X) Change () Addition () Delete MOORE, EILEEN B MOORE, EILEEN B Name: Name:

734 SE ADAMS CT 1547 FLORIDA MANGO RD NO BLDG 11-3 Address: Address:

City-St-Zip: PORT ST. LUCIE, FL 34984 City-St-Zip: WEST PALM BEACH, FL 33409

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: JAMES B. MOORE PDT 01/16/2009