

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000058353

FILED
May 22, 2008
Secretary of State

Entity Name: RC COASTAL WELL & PUMP, INC.

Current Principal Place of Business:

2227 MURPHY CT
UNIT 2
NORTH PORT, FL 34289

New Principal Place of Business:

942 LEMON BAY DR
VENICE, FL 3293

Current Mailing Address:

2227 MURPHY CT
UNIT 2
NORTH PORT, FL 34289

New Mailing Address:

P.O.BOX 2095
VENICE, FL 34285

FEI Number: 65-0928009

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BENT, JODELL S
2227 MURPHY CT
UNIT 2
NORTH PORT, FL 34287 US

Name and Address of New Registered Agent:

BENT, JODELL S
942 LEMON BAY DR
VENICE, FL 34293 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:

05/22/2008

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: BENT, ROBERT J
Address: 2227 MURPHY CT UNIT 2
City-St-Zip: NORTH PORT, FL 34289

Title: S () Delete
Name: BENT, JODELL S
Address: 2227 MURPHY CT UNIT 2
City-St-Zip: NORTH PORT, FL 34289

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: BENT, ROBERT J
Address: 942 LEMONBAY DR
City-St-Zip: VENICE, FL 34293

Title: S (X) Change () Addition
Name: BENT, JODELL S
Address: 942 LEMON BAY DR
City-St-Zip: VENICE, FL 34293

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: JODELL BENT

S

05/22/2008

Electronic Signature of Signing Officer or Director

Date