

2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K39759

Entity Name: COASTAL CONSTRUCTION OF MONROE, INC.**Current Principal Place of Business:**5959 BLUE LAGOON DR
STE. 200
MIAMI, FL 33126**Current Mailing Address:**5959 BLUE LAGOON DR
STE. 200
MIAMI, FL 33126**FEI Number:** 65-0802683**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MOYE, JAMES E JR.
5959 BLUE LAGOON DR
STE. 200
MIAMI, FL 33126 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 E MOYE

04/18/2018

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	CHAIRMAN
Name	WHITEMAN, DANIEL E
Address	5959 BLUE LAGGON DR., STE. 200
City-State-Zip:	MIAMI FL 33126

Title	TREASURER
Name	ALDERMAN, KEN R
Address	5959 BLUE LAGOON SR., STE. 200
City-State-Zip:	MIAMI FL 33126

Title	PRESIDENT
Name	MURPHY, THOMAS C
Address	5959 BLUE LAGOON DR., STE. 200
City-State-Zip:	MIAMI FL 33126

Title	PRESIDENT
Name	MURPHY, SEAN M
Address	5959 BLUE LAGOON DR., STE. 200
City-State-Zip:	MIAMI FL 33126

Title	ASST. SECRETARY
Name	PHILBRICK, LYNN
Address	5959 BLUE LAGOON DR., STE. 200
City-State-Zip:	MIAMI FL 33126

Title	SECRETARY
Name	MOYE, JAMES E JR.
Address	5959 BLUE LAGOON DR SUITE 200
City-State-Zip:	MIAMI FL 33126

I hereby 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 all other like empowered.

SIGNATURE: JAMES E MOYE**SECRETARY**

04/18/2018

Electronic Signature of Signing Officer/Director Detail

Date