

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000037441

Entity Name: COASTAL IRRIGATION SERVICE, INC.

Current Principal Place of Business:

5994 SW MARKEL STREET
PALM CITY, FL 34990

Current Mailing Address:

POST OFFICE BOX 106
PALM CITY, FL 34991

FEI Number: 03-0446777

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

TAYLOR, WILLIAM RIII
5994 SW MARKEL STREET
PALM CITY, FL 34990 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: _____

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PS
Name TAYLOR, WILLIAM RIII
Address 5994 SW MARKEL STREET
City-State-Zip: PALM CITY FL 34990

Title VPT
Name TAYLOR, KAREN A
Address 5994 SW MARKEL STREET
City-State-Zip: PALM CITY FL 34990

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: WILLIAM R. TAYLOR III

PRESIDENT

03/10/2015

Electronic Signature of Signing Officer/Director Detail

Date