## 2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000128408

Entity Name: COASTAL CONSTRUCTION AND INSPECTION CORP

**FILED** Apr 13, 2017 **Secretary of State** CC9141785527

## **Current Principal Place of Business:**

5031 NORTH BEACH ROAD **UNIT 124** ENGLEWOOD, FL 34223

## **Current Mailing Address:**

5031 NORTH BEACH ROAD **UNIT 124** ENGLEWOOD, FL 34223 US

FEI Number: 51-0488978 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

WEBER, ROBERT K 5031 NORTH BEACH ROAD **UNIT 124** ENGLEWOOD, FL 34223 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:

Date Electronic Signature of Registered Agent

City-State-Zip:

ENGLEWOOD FL 34223

Officer/Director Detail:

Title **PRESIDENT** Title

Name WEBER, ROBERT K Name MILLER, GREGORY M

5031 NORTH BEACH ROAD UNIT 124 5031 NORTH BEACH ROAD Address Address

**UNIT 124** City-State-Zip: ENGLEWOOD FL 34223

Title **TREASURER** 

Title **SECRETARY** Name WEBER, TYLER R

Name WEBER, KATHERINE T 5031 NORTH BEACH ROAD Address

Address 5031 NORTH BEACH ROAD **UNIT 124** 

**UNIT 124** ENGLEWOOD FL 34223

City-State-Zip: City-State-Zip: ENGLEWOOD FL 34223

Title **DIRECTOR** WILKER, JOHN T Name Address 112 LOVERS LANE

FORT MYERS BEACH FL 33931 City-State-Zip:

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.

04/13/2017 SIGNATURE: ROBERT WEBER **PRESIDENT**