

2025 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000001728

Entity Name: COASTAL ALARM SYSTEMS, INC.

Current Principal Place of Business:

445 PINE BLUFF TRAIL
ORMOND BEACH, FL 32175

Current Mailing Address:

P.O. BOX 4161
ORMOND BEACH, FL 32175

FEI Number: 59-3156106

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BUSH, MICHAEL A
445 PINE BLUFF TRAIL
ORMOND BEACH, FL 32174 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 PRES
Name BUSH, MICHAEL A
Address 445 PINE BLUFF TRAIL
City-State-Zip: ORMOND BEACH FL 32174

Title VP
Name BUSH, JACKSON THOMAS
Address P.O. BOX 4161
City-State-Zip: ORMOND BEACH FL 32175

Title MANAGER
Name NELSON, JOSEPH WESLEY
Address P.O. BOX 4161
City-State-Zip: ORMOND BEACH FL 32175

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: MICHAEL A. BUSH

PRESIDENT

01/27/2025

Electronic Signature of Signing Officer/Director Detail

Date