

**2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P99000044500

**Entity Name:** P.L. COLEMAN, INC.

**Current Principal Place of Business:**

9013 SW 78 PL  
MIAMI, FL 33156

**Current Mailing Address:**

PO BOX 561008  
MIAMI, FL 33156

**FEI Number:** 65-0996506

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

COLEMAN, PHILLIP L  
9013 SW 78 PL  
MIAMI, FL 33156 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 DPST  
Name COLEMAN, PHILLIP L  
Address PO BIX 561008  
City-State-Zip: MIAMI FL 33256

Title VP  
Name COLEMAN, SUSANNE T  
Address P.O. BOX 561008  
City-State-Zip: MIAMI FL 33256

Title S  
Name COLEMAN, CHARLES H  
Address P.O. BOX 561008  
City-State-Zip: MIAMI FL 33256

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:** PHILLIP LLOYD COLEMAN

**PRESIDENT**

**04/02/2013**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date