

**2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P98000068028

**Entity Name:** MAJESTIC WEST, INC.

**Current Principal Place of Business:**

1910 PROSPECTOR AVE.  
P.O. BOX 681329  
PARK CITY, UT 84068

**Current Mailing Address:**

1910 PROSPECTOR AVE.  
P.O. BOX 681329  
PARK CITY, UT 84068 US

**FEI Number:** 59-3524812

**Certificate of Status Desired:** No

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

COLEMAN, MARK L  
552 PINE GROVE LANE  
NAPLES, FL 34103 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:** MARK COLEMAN

03/24/2019

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name COLEMAN, STEPHEN D  
Address 1910 PROSPECTOR AVE.  
P.O. BOX 681329  
City-State-Zip: PARK CITY UT 84068

Title DVPS  
Name COLEMAN, MARK L  
Address 552 PINE GROVE LANE  
City-State-Zip: NAPLES FL 34103

Title D  
Name COLEMAN, JEFFREY  
Address 1910 PROSPECTOR AVE.  
P.O. BOX 681329  
City-State-Zip: PARK CITY UT 84068

*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:** MARK COLEMAN

MGR

03/24/2019

Electronic Signature of Signing Officer/Director Detail

Date