## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

Mailing Address

P O BOX 20001

PROFIT CORPORATION ANNUAL REPORT

1997



appears in Block 12 or Block 13 if changed, or on an attachment with an address.

FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000024769 (9)

COASTAL ELECTRIC, INC.

Principal Place of Business

521 A COMMERCE DR

PANAMA CITY BCH FL 32407 PANAMA CITY BCH FL 32407-2001 3a. Date of Last Report 3. Date Incorporated or Qualified 03/28/1994 03/19/1996 2. Principal Place of Business 2a. Mailing Address Applied For 26 59-3249709 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Zip Country Zip Country 8. This corporation has liability for intangible tax under s. 199.032, Yes No 30 Florida Statutes 24 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name ISLER, CHARLES S III 434 MAGNOLIA AVENUE 82 Street Address (P.O. Box Number is Not Acceptable) PANAMA CITY FL 32401 83 64 City 85 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am lamiliar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signal in Typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIBECTORS IN 12 (96/6)DELETE 1.1 TITLE TITLE RAMSEY, TIMOTHY C NAME 1.2 NAME 1330 STEPHEN DRIVE STREET ADDRESS 1.3 STREET ADDRESS PANAMA CITY FL 32405 DITY-ST-ZIP 1.4 CITY - ST-ZIP DELETE Change Addition TITLE 2.1 TITLE MONTGOMERY, CHRISTOPHER L 2.2 NAME NAME 6428 SUNSET AVENUE STREET ADDRESS 2.3 STREET ADDRESS PANAMA CITY BEACH FL 32407 CHY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE Addition Change TITLE 3.1 TITLE 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST- ZIP DELETE Change Addition 4.1 TITLE NAME 4, 2 NAME STREET ADORESS 4.3 STREET ADDRESS CITY-S1-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition 5.1 TITLE TITLE NAME 5.2 NAME STREET ADDRESS **5.3 STREET ADDRESS** 5.4 CITY-ST-ZIP C(1) Y - ST - 2(F DELETE Change Addition THE 61 TITLE NAME 62 NAME STREET ADDRESS **63 STREET ADDRESS** CITY-ST-7P 64 CITY - ST-ZIP 14. Ido hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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

Partsey (vice President) 1/14

FILED
Jan 31 1997 8:00am
Secretary of State