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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # 262042

WEST COAST STEEL ERECTORS, INC.

T ILLED									
Feb 05, 1999 8:00am									
Secretary of State									

02-05-1999 90015 022 ***150.00

EII ED



Principal Plac	e of Business	Ma	Mailing Address				4 100110 11010 Bitts 11011 00111 01010 1131 01311 81011 81011 01011 01011 01011			
19273 BLOUNT RD LUTZ FL 33549			PO BOX 16578				·			
			MPA FL 33687-3578							
บร		US	•				DO NOT WRI	TE IN THIS	SPACE .	
•							3. Date Incorporated or Qualifed 08/21/1962			
2. Principal P	lace of Business	2a.	Mailing Address				4. FEI Number	:	. A	oplied For
11		26					59-0976837		N	ot Applicable
Suite, Apt. #, etc.			Suite, Apt. #, etc.				E. Continue of Otation Desired		\$8.75	Additional
22			27				5. Certifcate of Status Desired		Fee Re	equired
City & State			City & State				6. Election Campaign Financing		\$5.00	May Be
23			28				Trust Fund Contribution			to Fees
Zip '	Country		Zip	Cou	intry		8. This corporation owes the curr	ent year Int	angible	
4	25	29		30			Personal Property Tax.		I⊉ Yes	□No
<u> </u>	9. Name and Address of Current	Regis	tered Agent				10. Name and Address of New F	legistered /	Agent	
STA	NSEL, EDWARD L				81	Name				
	73 BLOUNT ROAD	3.			82	Street Add	tress (P.O. Box Number is Not Accepta	ible)		
	Z FL 33549		-		83			4 5 1 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	2.3. Je ti	459 91511 955
		,				0			1.68 (g)	
					84	City		FL	85 Zip	Code
SIGNATURE	egistered agent, or both, in the State o m familiar with, and accept the obligati Signature, typed or printed name of registered agent			-			ion's board of directors. I hereby accepted when reinstating)	ot the appoir	ntment as re	gistered
12.	OFFICERS AND	DIRE	CTORS	13.			ADDITIONS/CHANGES TO OF	FICERS AN	D DIRECTO	ORS IN 12
TITLE	PD ·		☐ DELETE	1.1 TT	πE				☐ Change	☐ Addition
NAME	STANSEL, EDWARD L.			1.2 N	ME					
STREET ADDRESS	19273 BLOUNT ROAD			1.3 \$1	REET	ADDRESS				
CITY-ST-ZIP	LUTZ FL			1.4 CI	TY-\$1	r-ZIP				
шт	VDS		☐ DELETE	2.1 TT					Change	Addition
NAME	NORRIS, BETTY JO			2.2 N	ME		•			•
STREET ADDRESS	5501 PURITAN ROAD					ADDRESS				
CITY-ST-ZIP	TAMPA FL				ITY-S		•			
TITLE	D.		☐ DELETE	3.1 TT		1-21	*		Change	Addition
NAME	KELLY, RONALD	,		3.2 N				•	. —	
STREET ADDRESS	1211 LAKE CHARLES CIR	lar.				ADDRESS				
	LUTZ FL			3.4. C				$\sum_{n \in \mathcal{N}} f_n^{(n)}$		
CITY-ST-ZIP	D		☐ DELETE	4.1 TI		1.71	3		Change	Addition
	STANSEL, DENNIS EDWARD			4. 2 N			* .			
NAME STREET ADDRESS	4716 PRESIDENTIAL ST	, i .				ADDRESS				1
1.	SEFFNER FL	* /			KEET TY-ST		_			
ĆITY-ST-ZIP TITLE	OLI I NEN I L		DELETE	4.4 CI		· - ∠IP*			Change	Addition (
				5.1 N/						
NAME						ADDRESS			المسار الأحال	
STREET ADORESS				5.4 CI		•				
CITY-ST-ZIP			☐ DELETE	6.1 TF		-215			☐ Change	Addition
	18 17 F 17 17 17 17 17 17 17 17 17 17 17 17 17			6.2 N/					- Anamage	
NAME	ROYAL TO THE		•			ADDRESS				
STREET ADDRESS	7.0		•	6.3 \$1	KEET	ADDRESS			•	ŀ

14. I 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 appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP