

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 273932

1. Entity Name

COASTAL INSURANCE SERVICE, INC.

FILED

Feb 02, 2001 8:00 am
Secretary of State

02-02-2001 90306 037 ***150.00

Principal Place of Business

201-205 S PINELLAS AVE.
TARPON SPRINGS FL 34689

Mailing Address

C/O BETTY J CRETEKOS
PO BOX 1088
TARPON SPRINGS FL 34688-0888-1088
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 59-1029804

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

KAVOUKLIS, ANGELIKI M
385 BANANA ST.
TARPON SPRINGS FL 34689

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

| TITLE | NAME | STREET ADDRESS | CITY-ST-ZIP | <input type="checkbox"/> Delete |
|-------|-------------------|-------------------------|-------------------------|---------------------------------|
| P | CRETEKOS, BETTY J | ST. GEORGES LODGE #3379 | TARPON SPRINGS FL 34688 | |
| V | GAUSE, ROBERT P | 1316 BELCHER DRIVE | TARPON SPRINGS FL 34689 | |
| S | SWARTSEL, E. F. | 4419 GRAND BLVD. | ELFERS FL 34680 | |
| T | TARAPANI, ABE L | 750 BAYSHORE DRIVE | TARPON SPRINGS FL 34689 | |
| D | GIANESKIS, GRACE | 853 OAKWOOD DR | TARPON SPRINGS FL 34689 | |
| D | STEVENS, JAMES M | 35 WEST LEMON STREET | TARPON SPRINGS FL 34689 | |

| TITLE | NAME | STREET ADDRESS | CITY-ST-ZIP | <input type="checkbox"/> Change | <input type="checkbox"/> Addition |
|-------|------|----------------|-------------|---------------------------------|-----------------------------------|
| | | | | | |
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13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Betty J. Cretikos*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Betty J. Cretikos, Pres.

1-25-01

Date

727/939-2849

Daytime Phone #

CR2E034 (10/00)