

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 309000 (8)

1. Corporation Name

LEHIGH BUILDING SUPPLY, INC.
PALM COAST HOLDINGS, INC.

700001748507
-03/19/96--01025--021
***200.00



Principal Place of Business

201 E. JOEL BLVD.
LEHIGH ACRES FL 33936

Mailing Address

201 E. JOEL BLVD.
LEHIGH ACRES FL 33936

2. Principal Place of Business

21 1 Corporate Dr

Suite, Apt. #, etc.

22 City & State
23 Palm Coast, FL

24 Zip 32151 25 Country USA

2a. Mailing Address

26 226 E. Joel Blvd

Suite, Apt. #, etc.

27 City & State
28 Lehigh Acres, FL

29 Zip 33936 30 Country USA

9. Name and Address of Current Registered Agent

FORTANA, JAMES G.
201 E. JOEL BLVD.
LEHIGH ACRES FL 33936

3. Date Incorporated or Qualified

09/13/1966

3a. Date of Last Report

05/01/1995

4. FEI Number

59-1148977

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes. ☒ Yes ☐ No

10. Name and Address of New Registered Agent

81 Name

Janet Allison

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

226 E. Joel Blvd

83

84 City

Lehigh Acres

FL

85 Zip Code

33936

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 familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature of registered agent and filer if applicable

(NOTE: Registered Agent signature required when requested)

DATE

3/19/96

12. OFFICERS AND DIRECTORS

TITLE	VD	<input checked="" type="checkbox"/> DELETE
NAME	JAMES G. FORTANA	
STREET ADDRESS	201 E. JOEL BLVD.	
CITY-ST-ZIP	LEHIGH ACRES FL	
TITLE	PD	<input checked="" type="checkbox"/> DELETE
NAME	W. DON WHYTE	
STREET ADDRESS	201 E. JOEL BLVD.	
CITY-ST-ZIP	LEHIGH ACRES FL	
TITLE	VS	<input type="checkbox"/> DELETE
NAME	ALLISON, JANET	
STREET ADDRESS	201 E. JOEL BLVD.	
CITY-ST-ZIP	LEHIGH ACRES FL	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	WILLIAM I. LIVINGSTON	
STREET ADDRESS	201 E. JOEL BLVD.	
CITY-ST-ZIP	LEHIGH ACRES FL	
TITLE	V	<input type="checkbox"/> DELETE
NAME	JOHN A. NATIELLO	
STREET ADDRESS	201 E. JOEL BLVD.	
CITY-ST-ZIP	LEHIGH ACRES FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	Donnie R. Crandell	
1.3 STREET ADDRESS	226 E. Joel Blvd	
1.4 CITY-ST-ZIP	Lehigh Acres, FL 33936	
2.1 TITLE	V/D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	Laura A. Holquist	
2.3 STREET ADDRESS	226 E. Joel Blvd	
2.4 CITY-ST-ZIP	Lehigh Acres, FL-33936	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.1 TITLE	S	
3.2 NAME		
3.3 STREET ADDRESS	226 E. Joel Blvd	
3.4 CITY-ST-ZIP		
4.1 TITLE	P/D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS	226 E. Joel Blvd	
4.4 CITY-ST-ZIP		
5.1 TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS	226 E. Joel Blvd	
5.4 CITY-ST-ZIP		
6.1 TITLE	V	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.2 NAME	Charles R. Faulkner	
6.3 STREET ADDRESS	226 E. Joel Blvd	
6.4 CITY-ST-ZIP	Lehigh Acres, FL 33936	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE: John A. Natiello, VP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/19/96

(continued)

(941) 368-3141

Daytime Phone

CR2E034 (12/95)

Attachment to 1995 Corporation Annual Report

309000 pg. 2

Corporation Name: **Palm Coast Holdings, Inc.**
(Formerly Lehigh Building Supply, Inc.)

FEI Number **59-1148977**

Document #: **309000 (8)**

Box 13 Con't **Additional Officers and/or Directors**

Title: **T/AS**
Name: **Margaret Horvath**
Street Address: **226 E. Joel Blvd.**
City, State, Zip: **Lehigh Acres, FL 33936**

☐ Change ☒ Addition