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

Mailing Address

**PROFIT** CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

**FILED** 

Feb 13, 1999 8:00am

**Secretary of State** 

02-13-1999 90023 004 \*\*\*150.00

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # 435976

Principal Place of Business

TITLE NAME

STREET ADDRESS

CITY-ST-ZIP

**GULF COAST RENTAL, INC.** 

990 3RD AVE NO NAPLES FL 34105 US		990 3RD AVE NO NAPLES FL 33940				DO NOT WRITE IN THIS SPACE		
us						3. Date incorporated or Qualifed		
						09/13/1973	, 	oplied For
Principal Place of Business     2a. Mailing Address						4. FEI Number	<u> </u>	
21		26				59-1485468		ot Applicable
Suite, Apt. #, etc. Suite			Suite, Apt. #, etc.			5. Certifcate of Status Desired   \$8.75 Additional Fee Required		
City & State City & State						6. Election Campaign Financing	\$5.00	May Be
¬ ´	•	├ <del></del>	ı ´			Trust Fund Contribution Added to Fees		
23	0	Zip		Country		8. This corporation owes the current year Int.	angible	
Zip	Country	<del></del>		O Contrary		Personal Property Tax.	Yes	□No
24	25	29	30			10. Name and Address of New Registered		
	9. Name and Address of Curre	nt Registered Age	nt	81	Nome	10. Name and Address of New Regions of		
		•		01	Name	•		
WILLIAM H. BENNETT , JR. 3-17 S.W. 41ST TERR NAPLES FL 34105				82	Street Addr	ress (P.O. Box Number is Not Acceptable)		- ANY - 212
				83			重量量	
				84	City	The state of the s	85 Zip	Code
					1	poration submits this statement for the purpose of on's hoard of directors. I hereby accept the appoint	<u> </u>	
SIGNATURE	Signature, typed or printed name of registered ag		(NOTE: Regit	stered Age	nt signature require	ad when reinstating) 13. DATE  ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECT	ORS IN 12
12.	OFFICERS A	ND DIRECTORS	DELETE	1.1 TITLE			Change	
TITLE	P	_				in significant		
NAME	BENNETT, PATRICIA		1	1.2 NAME			•	
STREET ADDRESS	709 COURTSIDE DRIVE			1.3 STREE	TADORESS	•		
CITY-ST-ZIP	NAPLES FL			1.4 CITY-S	T-ZIP		Change	Addition
TITLE	VP		] DELETE	2.1 TITLE			Change	
NAME	WILLIAM H. BENNETT , JR.			2.2 NAME				
STREET ADDRESS	3017 S.W. 41ST TERR			2.3 STREE	T ADDRESS			
	NAPLES FL			2. 4 CITY-	ST-ZIP	<u>.</u>		<u> </u>
CITY-ST-ZIP TITLE	THREEOTE		DELETE	3.1 TITLE		- <del></del>	Change	Addition
	$d^{(*)}$		l l	3.2 NAME				
NAME	[6%] (1) [6]				T ADDRESS	and the season of the second of		1
STREET ADDRESS			The state of the s	3.4. CITY-				
CITY-ST-ZIP			DELETE	4.1 TITLE	31-2IF	· · · · · · · · · · · · · · · · · · ·	. Change	Addition
TITLE		L						
NAME			ļ	4. 2 NAME				
STREET ADDRESS					T ADDRESS			
CITY-ST-ZIP			7-5-5-	4.4 CITY-	ST-ZIP		☐ Changi	e
TITLE		{	] DELETE	5.1 TITLE				
NAME				5.2 NAME				
STREET ADDRESS	1.		Į.		T ADDRESS			
CITY-ST-ZIP			<u></u> I	5.4 CITY-	ST-ZIP	<u> </u>		
	1 2 1		DELETE	6.1 TITLE			Chang	e 🔲 Addition

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.

SIGNATURE

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP