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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name

482818

(2)

TRANS COASTAL ROOFING COMPANY

## FILED Apr 21 1998 8:00am Secretary of State



					<del> </del>	{	
Principal Place of Business Mailing Address							
1425 WILKINS AVE 1425 WILKINS AVE							
WEST PALM BEACH FL 33401 WEST PALM BEACH FL 3			DENOM PL 33	401		DO NOT WRITE IN THIS SPACE.	
						3. Date Incorporated or Qualified	
						08/08/1975	
	Place of Business	2a, Mailing A	ddress			4. FEI Number	Applied For
21		26				59-1625635	Not Applicable
Suite, Apl.	. #, etc.	Suite, Ap	t. #, otc.			5. Certificate of Status Desired	\$8.75 Additional Fee Regulred
City & Sta	le	City & Str	ate	.,		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip		Country	,	8. This corporation owes or has paid the curre	
24	25	29	3	ا آ			Yes No
	g. Name and Address of Curren			<u> </u>		10. Name and Address of New Registered A	gent
BI	URGARD, DUANE			81	Name		
	125 WILKINS AVE			82	Street Add	ress (P.O. Box Number is Not Acceptable)	
	EST PALM BEACH FL 33401			02	Direct ride	ics (1.0. Bbx Harrisor to Feet 1 to options)	
				83			
				84	City		85 Zip Code
				-	City	poration submits this statement for the purpose of tion's board of directors. I hereby accept the apport	1 1 '
SIGNATURE 12.	Signature, typied or printed name of right restage OFFICERS AN		(NOTE: )	Registered Ag	int signature requ	(red when reinstaling) DATE ADDITIONS/CHANGES TO OFFICERS AND	DIRECTORS IN 12
TITLE	PD		DELETE	1.1 TITLE			Change Addition
NAME	BURGARD, DUANE			1.2 NAME			
STREET ADDRESS	1425 WILKINS AVE			1.3 STREE	ADDRESS		
CITY-ST-ZIP	WEST PALM BEACH FL 3340			1.4 CITY - S	61 - 7IP		
TITLE	STD		] DELETE	2.1 TIILE			Change Addition
NAME	COCHRANE, G.R.			2.2 NAME			
STREET ADDRESS	1425 WILKINS AVE			2.3 STREE	ADDRESS		
CITY-ST-ZIP	WEST PALM BEACH FL 3340			2.4 C(1)Y-	S1-ZIP		
TITLE	VPD	L.	DECETE	3.1 TITLE			Change Addition
NAME	CASEY, MARK T			3.2 NAME			
STREET ADDRESS		n4			ADDRESS		
CITY-ST-ZIP	WEST PALM BEACH FL 3340		DELETE	3.4. CITY -	ST-ZIP		Change Addition
TITLE		Ł.	T NOTE OF	4.1 TITLE 4. 2 NAME			and Distriction
NAME OTOGET ADDRESS					ADDRESS		
STREET ADDRESS							
CITY-ST-ZIP TITLE			DELETE	4.4 CITY - : 5.1 TITLE	21 - 4M		Change Addition
NAME		<u>-</u>	_	5.2 NAME			-
STREET ADDRESS					I ADDRESS		
CITY-ST-ZIP				5.4 C/1Y-1	ľ		
TITLE	<del></del>		DELFTE	61 TITLE			Change Addition
NAME				O I IIICI			
HANNE		<del>-</del>	J 2111.12	6.2 NAME		,	
		_	J 2000 IP	6.2 NAME	T ADDRESS		
STREET ADDRESS				6.2 NAME 6.3 STREE 6.4 CITY-	S1-7IP	n Section 119.07(3)(i), Florida Statutes. I further cei	•

14. Thereby certify that the information supplied with this tiling does not quality for the exemption stated in Section 119.07(3)(i), Florida Statutes. Further being make the information indicated on this annual report or supplemental adjusted 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 ecceiver or trustee emotypered to be cute 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 affects.

B