## **2001 UNIFORM BUSINESS REPORT (UBR)**

## FILED Apr 26, 2001 8:00 am Secretary of State **DOCUMENT # 532310** 1. Entity Name COASTAL ENGINEERING CONSULTANTS, INC. 04-26-2001 90236 042 \*\*\*158.75 Principal Place of Business Mailing Address 3106 S HORSESHOE DR. 3106 S HORSESHOE DR. NAPLES FL 34104 NAPLES FL 34104 FIUUUJ US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc DO NOT WRITE IN THIS SPACE City & State City & State 4. FEì Number 59-1728628 Applied For Not Applicable Zip Country Zip Country \$8.75 Additional $\mathbf{X}\mathbf{X}$ 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Brown, Dennis C., Esq. BROWN, DENNIS C ESQ Street Address (P.O. Box Number is Not Acceptable) Bond, Schoeneck & King, P.A. NORTHERN TRUST BUILDING 4001 TAMIAMI TRAIL N. SUTE 250 4001 Tamiami Trail North, Suite 250 NAPLES FL 34102 Naples Zip Code 34103 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's gnature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS 11. 12 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 PD TITLE ☐ Delete 1916 ☐ Channe Addition STEPHEN, MICHAEL F NAME STREET ADDRESS 374 S GOLF DRIVE STREET ADDRESS CITY-ST-ZIP NAPLES, FL 00000 CITY-ST-ZIP ☐ Dalete TITLE ☐ Change Addition DANE, DOUGLAS J. NAME 6240 CYPRESS HOLLW WAY STREET ADDRESS STREET ADDRESS CITY - ST - ZIP NAPLES FL CITY-ST-ZIP ☐ Delete ☐ Addition Change WESTON, DAVID E. 4748 1ST AVE, S.W. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP NAPLES FL CITY - ST - ZIP TITLE Delete TITLE Change ☐ Addition EWING, RICHARD J NAME NAME 982 ROSE WAY STREET ADDRESS STREET ADDRESS CITY - ST - ZIP NAPLES FL CITY-ST-ZIP TiTLE **XX** Dalete TITLE Change **XX**Addition FOLEY, BLAIR A NAME NAME Michael T. Poff 120 EDGEMERE WAY SOUTH STREET ADDRESS STREET ADDRESS 1609 Gardenia Lane NAPLES FL 34105 CITY -ST-ZIP Naples, FL 34105 TITLE ☐ Delete ☐ Change TITLE Addition NAME NAME STREET ADDRESS. STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP 13. Thereby 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 emental 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 for trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Biock 11 or Biock 12 if indicated on this report or supp

CR2E034 (10/00)

941-643-2324

Michael T. Stephen NAMPH SHOWN OFFICE OF Tresident/Director

of the corporation or the rec changed, or on an attach

SICNALIS

4/18/01

Daytime Phone #