2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 26, 2004 8:00 am Secretary of State

DOCUMENT # 532310 1. Entity Name COASTAL ENGINEERING CONSULTANTS, INC.								04-26-2004	91008 02	2 ***158.	.75
Principal Place of Business 3106 S HORSESHOE DR. NAPLES, FL 34104 US			Mailing Address 3106 S HORSESHOE DR. NAPLES, FL 34104 US				1 (2 11) (11)	 1111 1400 11 11 1 11 11 8 8	FI MIRAY BARAI PIR	11 - 111 11 11 1 11	:
2. Principal Place of Business			3. Mailing Address								
Suite, Apt. #, etc.			Suite, Apt. #, etc.				03232004	Chg-P	CR2E0	34 (10/03)	
City & State			City & State				4. FEI Numb 59-172				plied For at Applicable
Zip		Country	Zip	Coun	itry		5. Certificate	of Status Desired		\$8.75 Add Fee Required	
	6. Name	and Address of Current	Registered Agent				7. Name and Address of New Registered Agent				
BROWN, DENNIS C ESQ BOND SCHOENECK & KING PA 4001 TAMIAMI TRAIL N, SUTE 250 NAPLES, FL 34103					Name Street Address (P.O. Box Number is Not Acceptable)						
		. *		City				FL	Zip Code	е	
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. I am familiar with, and accept the obligations of registered agent.											
SIGNATURE											
FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees											
10.		* OFFICERS AND	DIRECTORS	11.			ADDITIONS	CHANGES TO OFF	CERS AND	DIRECTOR!	S IN 11
NAME STREET ADDRESS CITY-ST-ZIP	PD STEPHEN 374 S GO NAPLES,		☐ Delate			VD Dilg 437 Sar	es Bru 05. Tan asota, 1	Le R. niami Ter EL 34231	il, Ste	□ Change 310	Addition
TITLE	VD	ar i	Delete	TITLE	<u> </u>	V			*****	☐ Change	Addition
NAME Street Address City-St-Zip					e Et address - St-Zip	Cautero, Vincent A. 3106 South Hoeseshoe Drive Naples FL 34104					
TITLE	VTD		☐ Delete	TITLE		V				Change	Addition
NAME	WESTON,			NAM	E	Reev	je, III,	William H	. ~		-
STREET ADDRESS CITY-ST-ZIP	4754 1ST NAPLES, I	AVENUE S.W. FL			ET ADDRESS -ST-ZIP	3100	6 South	William H Hoesesho 34104	oe Deiv	e	
TITLE	VD		☐ Delete	TITLE						☐ Change	☐ Addition
NAME	EWING, R			NAM	Ε						ŀ
STREET ADDRESS CITY-ST-ZIP	982 ROSE NAPLES, I				ET ADDRESS - St-Zip						
TITLE	VSD		☐ Delete	TITLE					<u>-</u>	☐ Change	Addition
NAME	POFF, MIC			NAM	E						
STREET ADDRESS	1	DENIA LANE .			ET ADDRESS						•
CITY-ST-ZIP	NAPLES,	FL		CITY	-ST-ZIP						<u></u>
TITLE	D	DANA	☐ Delete	TITLE						Change	Addition
NAME STREET ADDRESS	WORLEY, 2584 44TH	DANA L I TERRACE S.W.		NAMI	e Et address						
CITY-ST-ZIP	NAPLES, I				-ST-ZIP	İ					
12. 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 of supplieriental 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 mustee impowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.											