FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION
ANNUAL REPORT
1995

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

APPROVED
AND
FILED

95 MAY -1 AM 8:09

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **545528** **(2)**

1. Corporate Name

COASTAL COMMERCIAL BUILDERS, INC.

Principal Place of Business	Mailing Address
12536 SPRING HILL DRIVE UNITE B-2 SPRING HILL FL 34609	12536 SPRING HILL DRIVE UNITE B-2 SPRING HILL FL 34609

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **09/19/1977**	3a. Date of Last Report: **05/01/1994**
4. FEI Number: **59-1765348**	☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	**$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	**$5.00** May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No	

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
OLIVA, VINCENT W. 12536 SPRING HILL DR SPRING HILL FL 34609	81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Section 607.1502 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 607.1508, Florida Statutes.

SIGNATURE(S)

12. OFFICER(S) AND DIRECTOR(S)	13. ADDITIONS/CHANGES TO OFFICER(S) AND/OR DIRECTOR(S)
21 PD 22 OLIVA, VINCENT W. 23 12536 SPRING HILL DR 24 SPRING HILL FL	31 ☐ Change ☐ Addition 32 33 34
41 ☐ Change ☐ Addition 42 43 44	51 ☐ Change ☐ Addition 52 53 54
61 ☐ Change ☐ Addition 62 63 64	71 ☐ Change ☐ Addition 72 73 74
81 ☐ Change ☐ Addition 82 83 84	91 ☐ Change ☐ Addition 92 93 94

14. I declare, under, that the information in support with the filing is voluntarily furnished and does not qualify for the exemptions stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental 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 with an asterisk (*) in front of it, indicating my position.

SIGNATURE: Vincent W. Oliva VINCENT W. OLIVA 1/29/95 904 683-3655

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone

0384858 CP