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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # 578060

(6)

COASTLAND BUILDING CORP.

CONSTENIED DUILDING COL	· 17 ·	
D	\$4.9°	
Denoinal Diagonal Duningson	Molling Address	

## FILED Apr 15 1997 8:00am Secretary of State



•	lace of Business	Mailing Address					iri mimil milli filbi	., 61971 41911	******
4966 TAMIAN NAPLES FL 3		4966 tamiami trail n Naples FL 34103-2808							
						Date Incorporated or Qualified     07/07/1978		of Last R	leport
2. Principal	al Place of Business	2a. Mailing Address				4. FEI Number		TAI	oplied For
1		26	<del></del>			59-1842549			ot Applicable
2	pt #, etc	Suite, Apt. #, etc.				5. Certificate of Status Desired			Additional equired
City & St		City & State				6. Election Campaign Financing Trust Fund Contribution		Added	May Be to Fees
Zip Ti	Country	Z <sub>ip</sub>	Cou	ntry		8. This corporation has liability for			. 199.032,
<u> </u>	25 9. Name and Address of Cu	29	[30]			Florida Statutes  10. Name and Address of New F		No nent	
		Hent Hogistolou Agent		81 N	lame	IV. Name and Address of New 7	IOSISTOIGO M	Actu	
	ne, roger H 145 Galleon dr.		1						
	0. BOX 11028			82 5	treet Addre	ss (P.O. Box Number is Not Accept	able)		
	APLES FL 33940			83					
14/1	1 120 / 2 00010		,					Tial ···	
				B4 (	City		FL	<b>85</b> Zip	Code
SIGNATURE	Signar we it pass or triffied harve of registers	ed agent and title if applicable. (	(NOTE: Registered			d when reinstating)	DATE		
12.		AND DIRECTORS	13.			ADDITIONS/CHANGES TO OFF			
TIDLE	P	☐ DELETE	1,1 10	ILE			L	Change	Addition
AM:	FINE, ROGER H	10V 44000	1.2 NA		1				
STREET ADDRES	, , , , , , , , , , , , , , , , , , , ,	UX 11026		REET ADI					
HY-S1-7P ITLE	NAPLES, FL 00000								
		DETEXE		1Y-\$1-7	<u> </u>		<del></del> -	Change	Additio
	D CINC HEIENA A	DELEYE	2.1 TIT	TLE	-			Change	☐ Additio
AME	FINE, HELENA A	_	. 2.1 TIT 2.2 NA	TLE VME				Change	Addition
IAME STREET ADORES	FINE, HELENA A 1445 GALLEON DR. P.O. B	_	2.1 TII 2.2 NA 2.3 ST	TLE VME REET ADI	DRESS			Change	Addition
IAME STREET ADORES DITY+ST_ZIP	FINE, HELENA A	_	2.1 TIT 2.2 NA 2.3 ST 2.4 C	TLE VME REET ADI ITY - ST - 7	DRESS			Change Change	
IAME TREET ADORES ITY-ST ZIP ITUE	FINE, HELENA A 1445 GALLEON DR. P.O. B	OX 11026	2.1 TIT 2.2 NA 2.3 ST 2.4 Ct	TLE VME REET ADI ITY - ST - 7 TLE	DRESS				
IAME VIREET ADORES VIRYEST ZIP VILEE VAME	FINE, HELENA A 1445 GALLEON DR. P.O. B NAPLES, FL 00000	OX 11026	2.5 TII 2.2 NA 2.3 ST 2.4 CI 3.1 TII 3.2 NA	TLE VME REET ADI ITY - ST - 7 TLE	DRESS PIP				
IAME LIBERT ADORES LITY-ST ZIP LITT LIAME LIBERT ADORES	FINE, HELENA A 1445 GALLEON DR. P.O. B NAPLES, FL 00000	OX 11026	2.1 TII 2.2 NA 2.3 ST 2.4 CI 3.1 TII 3.2 NA 3.3 ST	TLE NME REET ADI HTY - ST - 2 TLE NME	DRESS DRESS				
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IAME ITREET ADDRES ITY-ST-ZIP ITTE IAME ITSEET ADDRES ITY-ST-ZIP	FINE, HELENA A 1445 GALLEON DR. P.O. B NAPLES, FL 00000	OX 11028	2.5 TII 2.2 NA 2.3 ST 2.4 CI 3.1 TII 3.2 NA 3.3 ST 3.4 CI	TLE  WME  REET ADI HTY-ST-; TLE  AME  REET ADI HTY-ST-; TLE	DRESS DRESS			Change	Additio
IAME TREET ADORES OBY-ST-ZIP OBJE TAME TREET ADORES OBJE TITL-ST-ZIP OBJE TAME	FINE, HELENA A 1445 GALLEON DR. P.O. B NAPLES, FL 00000	OX 11028	2.1 TII 22 NA 2.3 ST 2.4 CI 3.1 TII 32 NA 3.3 ST 3.4 CI 4.1 TII 4.2 N	TLE  WME  REET ADI HTY-ST-; TLE  AME  REET ADI HTY-ST-; TLE	DRESS DRESS			Change	Additio
IAME TREET ADDRES THY ST ZIP THE TAME TAME TAME THE TADDRES THY ST ZIP THE TAME THE TADDRES THY ST ZIP	FINE, HELENA A 1445 GALLEON DR. P.O. B NAPLES, FL 00000	DELETE	2.1 TII 22 NA 2.3 ST 2.4 CI 3.1 TII 32 NA 33 ST 34. CI 41 TII 4.2 NA 4.3 ST 4.4 CI	TLE  REET ADI  HTY-ST-;  TLE  AME  REET ADI  ITY-ST-;  TLE  AME  TLE  AME  TLE  TLE  TLE  TLE  TLE  TLE  TLE  T	ORESS ORESS ORESS			Change	Additio
IAME JUDEL ADORES JULY ST. ZIP JULE JAME JULY ST. ZIP JULE JULY ST. ZIP JULE JAME STREET ADORES JULY ST. ZIP JULE	FINE, HELENA A 1445 GALLEON DR. P.O. B NAPLES, FL 00000	OX 11028	2.5 TIT 22 NA 23 ST 2.4 CC 3.1 TIC 32 NA 33 ST 34 CC 41 TIC 4.2 NA 4.3 ST 4.4 CC	TLE  WME  REET ADI HTY-ST-; TLE  AME REET ADI HTY-ST-; TLE  AME IREET ADI HTY-ST-; TLE  TY-ST-; TLE	ORESS ORESS ORESS			Change	Additio
IAME STREET ADORES CITY ST. ZIP OTHE VAME STREET ADORES CITY ST. ZIP OTHE VAME STREET ADORES CITY ST. ZIP OTHE VAME	FINE, HELENA A 1445 GALLEON DR. P.O. B NAPLES, FL 00000	DELETE	2.5 TII 22 NA 23 ST 2.4 CI 3.1 TII 32 NA 33 ST 34 CI 4 1 TII 4.2 N 4.3 ST 4.4 CI 5.1 TII	TLE  MME  REET ADI  HTY-ST-;  TLE  AME  REET ADI  ITY-ST-;  TLE  AME  TLE  TLE  TLE  TLE  TLE  TLE  TLE  T	DRESS DRESS DRESS IP			Change	Additio
IAME LIBERT ADDRES LITY ST. ZIP LITE LIAME LIBERT ADDRES LIBERT ADDRES LIBERT ADDRES	FINE, HELENA A 1445 GALLEON DR. P.O. B NAPLES, FL 00000	DELETE	2.1 TII 22 NA 23 ST 2. 4 CI 3.1 TII 32 NA 33 ST 34 CI 41 TII 4.2 NA 4.3 ST 4.4 CI 5.1 TII 52 NA 5.3 ST	TLE  ME  REET ADI  HTY-ST-;  TLE  AME  REET ADI  ITY-ST-;  TLE  AME  ITEET ADI  TY-ST-Z  TLE  AME  REET ADI  REET ADI	DRESS DRESS DRESS DRESS DRESS			Change	Additio
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NAME STREET ADDRES CITY-ST-ZIP TITLE NAME	FINE, HELENA A 1445 GALLEON DR. P.O. B NAPLES, FL 00000	DELETE	2.1 TII 22 NA 2.3 ST 2.4 CI 3.1 TII 32 NA 33 ST 34 CI 41 TII 4.2 NA 4.3 ST 4.4 CI 5.1 TII 5.2 NA 5.3 ST 6.1 TII 6.2 NA	TILE  REET ADI  VIY-ST-;  ILE  AMME  REET ADI  VIY-ST-;  LE  AMME  REET ADI  LITY-ST-;  ILE  AMME  REET ADI  LITY-ST-Z  AMME  REET ADI  LITY-ST-Z  AMME	ORESS UP ORESS UP ORESS UP ORESS			Change	Additio
NAME STREET ADORES CITY-ST-ZIP THLE NAME	FINE, HELENA A 1445 GALLEON DR. P.O. B NAPLES, FL 00000	DELETE	2.1 TII 22 NA 2.3 ST 2.4 CI 3.1 TII 32 NA 33 ST 34 CI 4.1 TII 4.2 NA 4.3 ST 4.4 CI 5.1 TII 5.2 NA 5.3 ST 6.1 TII 6.2 NA 6.3 ST	TILE  REET ADI  VIY-SI-;  ILE  REET ADI  VIY-SI-;  TILE  AME  REET ADI  TIY-SI-;  TILE  AME  REET ADI  TIY-SI-;  TILE  AME  TIY-SI-;  TILE	ORESS UP  DRESS UP  DRESS UP  DRESS UP  DRESS			Change	Addition Addition Addition Addition

4. I do hereby certify that the into midion 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 inclicated 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 15 if changed, or on an attachment with an address.

SIGNATURE:

IGNATURE OF TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/11/97 (941)

(941)262-871