

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra S. Morton
Secretary of State
DIVISION OF CORPORATIONS

**APPROVED
AND
FILED**

95 APR 24 AM 7:37

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

DOCUMENT # 591514 (5)

1. Corporation Name

GULF COAST VAN & STORAGE, INC.

Principal Place of Business

**4780 DISTRIBUTION DRIVE
TAMPA FL 33605**

Mailing Address

**4780 DISTRIBUTION DRIVE
TAMPA FL 33605**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

10/27/1978

3a. Date of Last Report

04/19/1994

4. FEI Number

59-1850936

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

6. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☒ Yes

☐ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

24

Country

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

29

Country

30

9. Name and Address of Current Registered Agent

**BRENDE, DAVID
4780 DISTRIBUTION DRIVE
TAMPA, FLA
33605**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

10. Name and Address of New Registered Agent

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

PD

**BRENDE, JAMES M.
13503 GREENLEAF DR.
TAMPA FL**

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

T

**BRENDE, EDELTRAUD
13503 GREENLEAF DR.
TAMPA FL**

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

V

**BRENDE, DAVID
2940 FOREST CIRCLE
SEFFNER FL**

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

S

**BRENDE, STEVEN
13503 GREENLEAF DR.
TAMPA FL**

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

☐ Change ☐ Addition

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

☐ Change ☐ Addition

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

☐ Change ☐ Addition

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

☐ Change ☐ Addition

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

☐ Change ☐ Addition

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), Florida Statutes. I further certify that the information indicated 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 13 if changed, or on an attachment with an address.

SIGNATURE:

Edeltraud Brendle

4.18.95

73-242-3174

SIGNATURES AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #