## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

DOCUMENT # 591514

(5)

GULF COAST VAN & STORAGE, INC.

Mailing Address Principal Place of Business 4780 DISTRIBUTION DRIVE 4760 DISTRIBUTION DRIVE TAMPA FL 33605-5822 TAMPA FL 33605 3. Date Incorporated or Qualified 3a. Date of Last Report 10/27/1978 04/16/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-1850936 26 Not Applicable Suite, Apt. #, etc. Suite. Apt. #. etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 \$5.00 May Be City & State City & State 6. Election Campaign Financing Trust Fund Contribution 28 Added to Fees 23 Ζφ Zip Country Country 8. This corporation has liability for intangible tax under s. 199.032, Yes No 30 Florida Statutes 29 25 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name BRENDLE, DAVID 4760 DISTRIBUTION DRIVE 82 Street Address (P.O. Box Number is Not Acceptable) TAMPA, FLA 83 33605 84 City Zip Code 11. Pursuant to the provisions of Sections 607.0502 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 607.0505, Florida Statutes. SIGNATURE (NOTE Registered Agent signature required when reinstating) Signature, typical or printed name of registered agent and title if applicable 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. ■ DELETE ☐ Change Addition TITLE 1.1 TITLE BRENDLE, JAMES M. NAME 1.2 NAME 13503 GREENLEAF DR. 1.3 STREET ADDRESS STREET ADDRESS TAMPA FL. 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE BRENDLE, DAVID NAME 2.2 NAME 2940 FOREST CIRCLE STREET ADORESS 2.3 STREET ADDRESS SEFFNER FL CITY-ST-ZIP 2.4 City-St-ZiP DELETE Change Addition TITLE 3.1 TITLE BRENDLE, STEVEN 3.2 NAME NAME 13503 GREENLEAF DR. 3.3 STREET ADDRESS STREET ADORESS TAMPA FL 3.4. CITY-ST-ZIP CHY-ST-ZIP ☐ DELETE ☐ Change Addition TITLE 4.1 TITLE 4, 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY - ST- ZIP City-ST-2IP DELETE ☐ Change Addition 5.1 THTLE TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP CITY - ST - ZIP ☐ DELETE Addition TITLE 6.1 TITLE Change NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP CITY ST-ZIE 14. I do 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 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: STATUS AND TYPED OR PRINTED

STEVEN E BRENDLE

04/18/97 (813) 248-3174

**FILED** 

Apr 23 1997 8:00am

Secretary of State