

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

**CORPORATION
ANNUAL REPORT
1995**



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

**APPROVED
AND
FILED**

DOCUMENT # 613987 (7)

1. Corporation Name

EASTERN COAST DEVELOPERS, INC.

95 APR 28 PM 2:27

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

Principal Place of Business

**3903 S. ATLANTIC AVE.
DAYTONA BEACH FL 32127-6301**

Mailing Address

**3903 S. ATLANTIC AVE.
DAYTONA BEACH FL 32127-6301**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

03/22/1979

3a. Date of Last Report

07/20/1994

4. FEI Number

59-2008283

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 **1740 Ocean Shore Blvd**
Suite, Apt. #, etc.

2a. Mailing Address

26 Suite, Apt. #, etc.

22 **Ormond By the Sea**
City & State

27 City & State

23 **Fla 32176**
Zip

28 Zip

24 Country

29 Zip

30 Country

9. Name and Address of Current Registered Agent

**PALMER, CAROLE
3903 S. ATLANTIC AVE.
DAYTONA BEACH FL 32127**

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

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

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

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE **PO**
NAME **CROOKS, WILLIAM E JR**
STREET ADDRESS **2421 SO. PALMETTO**
CITY - ST - ZIP **DAYTONA BEACH FL**

TITLE **STD**
NAME **PALMER, CAROLE**
STREET ADDRESS **3903 S. ATLANTIC AVE.**
CITY - ST - ZIP **DAYTONA BEACH FL**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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 ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3. 29. 95

Date

904 788 105-3

Daytime Phone