

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

FILED  
May 19 1997 8:00 am  
Secretary of State

DOCUMENT # 625877

(6)

1. Corporation Name

GULF COAST MANAGEMENT, INC.

Principal Place of Business

% HOLIDAY ISLES  
14711 GULF BOULEVARD  
MADEIRA BEACH FL 33708

Mailing Address

% HOLIDAY ISLES  
14711 GULF BOULEVARD  
MADEIRA BEACH FL 33708-2151

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

29

30

9. Name and Address of Current Registered Agent

ST. PETERSBURG CORPORATE SERVICES, INC.  
405 PASADENA AVE., SOUTH  
ST. PETERSBURG FL 33707

3. Date Incorporated or Qualified

06/15/1979

3a. Date of Last Report

04/11/1996

4. FEI Number

59-1914021

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☒ No

10. Name and Address of New Registered Agent

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 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 title if applicable

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

DATE

12. OFFICERS AND DIRECTORS

TITLE PD  
NAME VANZYL, ROBERT  
STREET ADDRESS 14711 GULF BLVD  
CITY-ST-ZIP MADEIRA BEACH FL

☒ DELETE

TITLE PD  
NAME TREMBLAY, PETER  
STREET ADDRESS 14711 GULF BLVD  
CITY-ST-ZIP MADEIRA BEACH FL

☒ DELETE

TITLE D  
NAME SCHMID, HERMAN  
STREET ADDRESS 14711 GULF BLVD  
CITY-ST-ZIP MADEIRA BEACH FL

☒ DELETE

TITLE D  
NAME PLESS, CHARLES  
STREET ADDRESS 14711 GULF BLVD  
CITY-ST-ZIP MADEIRA BEACH FL

☒ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE → President  
1.2 NAME → George Johnston  
1.3 STREET ADDRESS → 14711 Gulf Blvd  
1.4 CITY-ST-ZIP → MADEIRA Beach FL

☐ Change ☒ Addition

2.1 TITLE → Dot Johnston - Vice President  
2.2 NAME → 14711 Gulf Blvd  
2.3 STREET ADDRESS → MADEIRA BEACH FL  
2.4 CITY-ST-ZIP →

☐ Change ☒ Addition

3.1 TITLE → Secretary  
3.2 NAME → Ruth HEFLIN  
3.3 STREET ADDRESS → 14711 Gulf Blvd  
3.4 CITY-ST-ZIP → MADEIRA Beach FL

☐ Change ☒ Addition

4.1 TITLE → Director  
4.2 NAME → DEN Foley  
4.3 STREET ADDRESS → 14711 Gulf Blvd  
4.4 CITY-ST-ZIP → MADEIRA Beach FL

☐ Change ☒ Addition

5.1 TITLE → VIRGINIA Gorte Director  
5.2 NAME → 14711 Gulf Blvd  
5.3 STREET ADDRESS → MADEIRA BEACH FL  
5.4 CITY-ST-ZIP → D

☐ 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 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:

*[Signature]*

4-7-97

BK Dep \$ 165.00

CR2E034 (9/96)