

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

**CORPORATION
ANNUAL REPORT
1995**



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

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

95 JAN 24 PM 3:01

DOCUMENT # 841514 (3)
1. Corporation Name
COASTAL MARINE CONSTRUCTION INCORPORATED

Principal Place of Business
**625 N. TAMiami TRAIL
VENICE FL 34292**

Mailing Address
**625 N. TAMiami TRAIL
VENICE FL 34292**

DO NOT WRITE IN THIS SPACE.

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 09/28/1978	3a. Date of Last Report 01/25/1994
21		26		4. FBI Number 59-1669706	Applied For Not Applicable
22. Suite, Apt. #, etc.		27. Suite, Apt. #, etc.		5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required	
23. City & State		28. City & State		6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
24. Zip	25. Country	29. Zip	30. Country	8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No	

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
LOGAN, DONALD J 625 NORTH TAMiami TRAIL VENICE FL 34292		B1. Name	
		B2. Street Address (P.O. Box Number is Not Acceptable)	
		B3.	
		B4. City	FL B5. Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, 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 registering)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VP	1.1 TITLE	☐ Change ☐ Addition
NAME	GERDON, ROBERT G	1.2 NAME	
STREET ADDRESS	625 N TAMiami TRAIL	1.3 STREET ADDRESS	
CITY-ST-ZIP	VENICE FL	1.4 CITY-ST-ZIP	
TITLE	VPS	2.1 TITLE	☐ Change ☐ Addition
NAME	NORRIS, LARRY E.	2.2 NAME	
STREET ADDRESS	625 N. TAMiami TRAIL	2.3 STREET ADDRESS	
CITY-ST-ZIP	VENICE FL	2.4 CITY-ST-ZIP	
TITLE	PT	3.1 TITLE	☐ Change ☐ Addition
NAME	LOGAN, DONALD J	3.2 NAME	
STREET ADDRESS	625 N TAMiami TRAIL	3.3 STREET ADDRESS	
CITY-ST-ZIP	VENICE FL	3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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)(b), 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 in an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Donald J. Logan, Pres./Treas. 1/13/95 813-485-2101

Title

Signature Printed #