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

PROFIT. CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 841514

COASTAL MARINE CONSTRUCTION INCORPORATED

Prir	ıciį	oal	Place	of	Bus	sir	įe.	55
625	N.	TA	MIAMI	TF	AIL		-	- 7

FILED Jan 21, 1999 8:00am **Secretary of State** 01-21-1999 90065 026 ***158.75



625 N. TAMIAMI TRAIL VENICE FL 34292			5 N. TAMIAMI TRAIL ENICE FL 34292				DO NOT WRITE IN THIS SP	ACE	=
						3.	Date Incorporated or Qualifed 09/28/1978		
2. Principal Place of I	Business	2a	. Mailing Address		•	4.	FEI Number	Т	Applied For
1	A STATE OF THE STA	26					59-1669706		Not Applicable
Suite, Apt. #, etc.		27	Suite, Apt. #, etc.			5.	Certifcate of Status Desired		75 Additional ee Required
City & State		28	City & State	•		6.	Election Campaign Financing Trust Fund Contribution	•	.00 May Be ded to Fees
Zip 4	Country 25	29	Zip Cou	intry		8.	This corporation owes the current year Intang Personal Property Tax.	ible Yes	No
9. N	ame and Address of Curre	nt Regi	stered Agent			10.	Name and Address of New Registered Age	nt	•
LOGAN, DO	ONALD J I TAMIAMI TRAIL		er i karin	81	Name				
625 NORTH	TAMIAMI TRAIL	V 3.	於·蘇州教教·一注	82	Street Addres	ss (P	P.O. Box Number is Not Acceptable)		
VENICE FL				83			The state of the s	2 2	8 1 2 32 4 53 (23) 2 2 1 1 3 7 21 44 (50)
				Ш				}	iidyn y y y y y y y y y y y y y y y y y y
nes at Firedesi Moad		•	and the second s	84	City		FL	15	Zip Code
	rovisions of Sections 607 050	2 and 6	07 1508 Florida Statutes the a	hove	-named cornor	otion	s cultimite this statement for the nurroses of cha	nair	a ite registered

office of 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: Re	raistered Agent signature	required when reinstating) - (1/2/2)	DATE
12.	OFFICERS AND DIRECTORS	13.		OFFICERS AND DIRECTORS IN 12
TITLE	VP □ DELETE	1.1 TITLE	the stage that	☐ 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 DELETE	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 Andrew Street, 18	2.4 CITY-ST-ZIP		
mre in	PT DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME ()	LUGAN, DUNALU J	3.2 NAME		
STREET ADDRESS	625 N TAMIAMI TRAIL	3.3 STREET ADDRESS		10.000000000000000000000000000000000000
CITY-ST-ZIP	VENICE FL	3.4. CITY-ST-ZIP	·	
TITLE	☐ DELETE	4.1 TITLE	4 · · · · · · · · · · · · · · · · · · ·	Change → ☐ Addition
NAME TO SEE		4. 2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		
CITY-ST-ZIP ·		4.4 CITY-ST-ZIP		
TITLE	DELETE	5.1 TITLE		Change Addition
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS	angen a ser processor outstation of the first of the	The transport of the
CITY-ST-ZIP	The second secon	5.4 CITY-ST-ZIP		
TITLE:	DELETE 7.3	61 MLE		Change Addition
NAME		62 NAME		
STREET ADDRESS	The state of the s	6.3 STREET ADDRESS	Company of the Compan	
CITY-ST-ZIP	The state of the s	6.4 CITY-ST-ZIP		

14. I 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 for 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, with all other like empowered.

SIGNATURE: