2001 UNIFORM BUSINESS REPORT (UBR)

Jan 26, 2001 8:00 am **DOCUMENT # 841514 Secretary of State** 1. Entity Name COASTAL MARINE CONSTRUCTION INCORPORATED 01-26-2001 90037 005 ***158.75 Principal Place of Business Mailing Address 625 N. TAMIAMI TRAIL 625 N. TAMIAMI TRAIL VENICE FL 34292 VENICE FL 34292 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 59-1669706 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent LOGAN, DONALD J Street Address (P.O. Box Number is Not Acceptable) 625 NORTH TAMIAMI TRAIL VENICE FL 34292 City Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. CR2E034 (10/00) Addition TITLE ☐ Delete TITLE Change GERDON, ROBERT G NAME NAME 625 N TAMIAMI TRAIL STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7IP VENICE FL ☐ Delete Change Addition TITLE TITLE NORRIS, LARRY E. NAME NAME 625 N. TAMIAMI TRAIL STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP VENICE FL TÍTER ☐ Addition. Delete -TITLE Change LOGAN, DONALD J NAME NAME 625 N TAMIAMI TRAIL STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP VENICE FL TITI F ☐ Delete TITI F Change Addition BREWER, HAROLD F NAME NAME 625 N. TAMIAMI TRL. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **VENICE FL** TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an articular truit and address, with additional statutes.

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

NAME

SIGNATURE AND TYPED OR PROTED NAME OF SIGNING OFFICER OR DIRECTOR

☐ Delete

DONALD J. LOGAR

1-17-01

941/483-2/0/

Change

☐ Addition

Daylime Phone #