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 # F19332 1. Corporation Name

GULF COAST ENERGY CONSULTANTS, INC.

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Principal Place of Business Mailing Address							
8520 GARDENIA DR 8520 GARDENIA DR							
LARGO FL 34647 LARGO FL 34647					DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualifed		
					02/12/1981		
9 Deineinal Di	lace of Business	2a. Mailing Address			4. FEI Number	T 1	Applied For
 7	IdCe Of Dusiness	26			59-2064429		Not Applicable
Suite, Apt.	# oto	Suite, Apt. #, etc.					Additional
22 Suite, Apr.	#, etc.	27			5. Certificate of Status Desired		Required
City & State	e	City & State			6. Election Campaign Financing	\$5.00	0 May Be
23		28			Trust Fund Contribution	Added	d to Fees
Zip	Country	Zip	Country		8. This corporation owes the current year Int	angible	
24	25	29 30			Personal Property Tax.	Yes	□No
	9. Name and Address of Curre	nt Registered Agent			10. Name and Address of New Registered	Agent	
			81	Name			
GRAHAM, PETER D				Stroot Addr	ress (P.O. Box Number is Not Acceptable)		
5200 CENTRAL AVENUE			82	Street Addr	1955 (F.O. Box Number 15 Not Acceptable)		
ST PETERSBURG FL			83		7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
			84	City	FŁ	85 Zir	o Code
0.00 - 2.00					poration submits this statement for the purpose of		
agent. I a SIGNATURE	m familiar with, and accept the obligi	ations of, Section 607.0505, Florida	Sialules	•	on's board of directors. I hereby accept the appoint		
10			13.		ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECT	rors in 12
TITLE	ST		1.1 TITLE		·	☐ Change	
NAME	HAINISCH, MAY A		1.2 NAME				
	8520 GARDENIA DR.			ADDRESS			
STREET ADDRESS	LARGO FL		1.4 CITY-S	1			
CITY-ST-ZIP	P	☐ DELETE	2.1 TITLE	1-21		☐ Chang	e
TITLE	<u> </u>		2.2 NAME				
NAME	ACCO CARRENIA DO			r Annoeses	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		4.
STREET ADDRESS		1	2.3 STREET ADDRES 2.4 CITY-ST-ZIP		1		
CITY-ST-ZIP	LARGO FL		2.4 CITT-S 3.1 TITLE	01-218		Chang	e Addition
TITLE TO THE	D, ORAMANA DETER D		3.2 NAME			_ •	
NAME	GRAHAM, PETER D	1					
STREET ADDRESS	5200 CENTRAL AVENUE			TADDRESS			
CITY-ST-ZIP	ST PETERSBURG, FL 00000		3.4. CITY- 5	ST-ZIP		☐ Chang	ie
TITLE		_	4.1 TITLE			C Charle	
NAME	. 4-		4. 2 NAME				
STREET ADDRESS				T ADDRESS			
CITY-ST-ZIP			4.4 CITY-S	T-ZIP		- Chara	e
TITLE		_	5.1 TITLE			Chang	e
NAME			5.2 NAME				
OTDEET ANDRESS			5.3 STREE	T ADDRESS			

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 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, with all other like empowered.

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

☐ DELETE

Daytime Phone #

☐ Change

FILED

Jan 20, 1999 8:00am

Secretary of State

01-20-1999 90014 011 ***150.00

Addition