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

PROFIT CORPORATION ANNUAL REPORT 1998 DOCUMENT # F30896 Principal Place of Business BIOL 45TH ST NO ST PETERSBURG FL 33714

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

(7)

COASTAL MODULAR BUILDINGS, INC.

Mailing Address	
6101 45TH ST N	8074.4

FILED Jan 20 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE U\$ 3. Date Incorporated or Qualified 04/16/1981 2a. Mailing Address 2. Principal Place of Business 4. FEI Number Applied For 21 Not Applicable 26 <u>59-2129471</u> Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees Žip Country Zip Country 8. This corporation owes or has paid the current year Intangible 14 Yes 24 25 29 30 Personal Property Tax due June 30. g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name FRAZIER, WARREN 501 E KENNEDY BLVD 82 Street Address (P.O. Box Number is Not Acceptable) **SUITE 1400** 83 TAMPA FL 33602 84 Zip Code City 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 reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE ☐ Change Addition TITLE 1.1 TITLE NAME STANLEY, LOWELL S 1.2 NAME **800 POST BOY COURT** STREET ADDRESS 1.3 STREET ADDRESS TOWSON, MARYLAND 00000 CHTY-ST-ZIP 14 CHTY-S1-ZIP DELETE VSD 2.1]ITLE Change Addition TITLE STANLEY, JUNELIA M NAME 2.2 NAME **800 POST BOY COURT** STREET ADDRESS 2.3 STREET ADDRESS TOWSON, MARYLAND 00000 CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE Addition Channe TITLE 3.1 THILE NAME TOBOLL, JACK 3.2 NAME 13777 FEATHER SOUND CIR E., #612 STREET ADDRESS 3 3 STREET ADDRESS CLEARWATER FL CITY - ST - 7IP 3.4. CITY - ST - ZIP DILETE Change Addition TITLE 4.1 THLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 C(1Y-ST-ZIP DELETE Change Addition TITLE 51 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - 7IP DELETE Change Addition TITLE 6.1 TITLE 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS City-St-ZiP 64 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 eath; 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:

813-528-8006