

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # F31689 (5)

1. Corporation Name

TRANS COASTAL ENTERPRISES, INC.

Principal Place of Business

7630 N. W. 6TH AVENUE  
BOCA RATON FL 33487

Mailing Address

7630 N. W. 6TH AVENUE  
BOCA RATON FL 33487



2. Principal Place of Business

21 1425 Wilkins Avenue

Suite, Apt. #, etc.

2a. Mailing Address

26 1425 Wilkins Avenue

Suite, Apt. #, etc.

22 City & State

23 West Palm Beach, FL

24 Zip 33401

25 Country USA

27 City & State

28 West Palm Beach, FL

29 Zip 33401

30 Country USA

9. Name and Address of Current Registered Agent

POORTMAN, C.J.  
7630 N. W. 6TH AVENUE  
BOCA RATON FL 33487

3. Date Incorporated or Qualified

04/22/1981

3a. Date of Last Report

04/14/1995

4. FEI Number

59-2089771

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution

☐ \$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s 199.032, Florida Statutes

☐ Yes ☒ No

10. Name and Address of New Registered Agent

81 Name

G. R. Cochrane

82 Street Address (P.O. Box Number is Not Acceptable)

1425 Wilkins Avenue

83

84 City

West Palm Beach

85 State FL

Zip Code

33401

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 G. R. Cochrane, Secretary

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

4/30/96

12. OFFICERS AND DIRECTORS

☒ DELETE

TITLE

PD

NAME

POORTMAN, C.J.

STREET ADDRESS

7630 N. W. 6TH AVENUE

CITY-ST-ZIP

BOCA RATON, FL 00000

TITLE

S

☐ DELETE

NAME

COCHRANE, G.R.

STREET ADDRESS

7630 NW 6TH AVE.

CITY-ST-ZIP

BOCA RATON FL

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

D

☐ Change ☒ Addition

1425 Wilkins Avenue  
West Palm Beach, FL 33401

P/D

Burgard, Duane

1425 Wilkins Avenue

West Palm Beach, FL 33401

☐ Change ☒ Addition

VP/D

Casey, Mark Terrell

1425 Wilkins Avenue

West Palm Beach, FL 33401

☐ Change ☒ Addition

☐ Change ☐ Addition

600001822036

-05/15/96--01039--003

\*\*\*200.00

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 119.07(3)(k), 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.

SIGNATURE:

G. R. Cochrane, Secretary

Date

4/15/96

407- 825-9255

Daytime Phone #

CR2E034 (12/95)