SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Jul 21, 1999 8:00 am Secrétary of State

07-21-1999 90012 021 ***550.00

DOCUMENT # F98000005122 1. Corporation Name

COASTALNET GEORGIA, INC.					- 604746	A0015 - ST	
					<u> </u>	1 20 11 13 111 1311	1 1111 1111 1111 1111 1111
Principal Place	e of Business	Mailing Address			T EMBELOND ELLER LOCAL TOTAL DAVIS DAVIS) 01101 11850 11010 1507 1001
196 NORTH FOREST AVENUE 196 NORTH FOREST AVENUE							
HARTWELL GA	30643	HARTWELL GA 30643			DO NOT WRITE	IN THIS SDA	ACE
					3. Date Incorporated or Qualified	IN THIS SEA	102
					09/11/1998		
2 Principal P	lace of Business	2a. Mailing Address			4. FEI Number		Applied For
21		26		58-1955343		- Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				□ \$	8.75 Additional
22		27			5. Certificate of Status Desired		Fee Required
City & State	e	City & State			6. Election Campaign Financing		\$5.00 May Be
23		28			Trust Fund Contribution	<u> </u>	Added to Fees
Žip	Country	Zip	Cour	ntry	8. This corporation owes the current		. 57 1
24	25	29	30		Intangible Personal Property.		es X No
	9. Name and Address of Current	Registered Agent		81 Name	10. Name and Address of New Re	gisterea Age	nt
Ст	CORPORATION SYSTEM			Name			
1200 SOUTH PINE ISLAND ROAD			82 Street Add	Iress (P.O. Box Number is Not Acceptable	e)		
PLANTATION FL 33324			-	83			
}							
				84 City		FL 8	5 Zip Code
11 Dumumt	to the provisions of sections 607.0502	and 607 1508 Florida Statut	es the abo	we-named com	oration submits this statement for the purp	nose of chang	ing its registered
l office or i	registered agent, or both, in the State	of Florida. Such change was	authorized	i by the corporat	tion's board of directors. I hereby accept	the appointme	ent as registered
)	am familiar with, and accept the obliga	tions of, section 607.0505, Fi	iorida Statt	utes.			}
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (N	IOTE: Register	red Agent signature re	quired when revistating)	DATE	
12.	OFFICERS ANI	DIRECTORS	13.		ADDITIONS/CHANGES TO OFFI		
TITLE	P				ADDITIONS/CHANGES TO OFFI	CERS AND D	IRECTORS IN 12
		DELETE	1.1 TIT	LE	ADDITIONS/CHANGES TO OFFI		IRECTORS IN 12 Change Addition
NAME [BARTON, J L	DELETE	1.1 TITI 1.2 NAI		ADDITIONS/OFFICES TO OFFI		IRECTORS IN 12 Change Addition
NAME STREET ADDRESS	196 NORTH FOREST AVENUE	DELETE	1.2 NAI		ADDITIONS/CHANGES TO OFFI		Change Addition
!	196 NORTH FOREST AVENUE HARTWELL GA 30643	DELETE	1.2 NAI 1.3 STR 1.4 CIT	ME REET ADDRESS TY-ST-ZIP	AUDITIONS/CHANGES TO OFFI		Change Addition
STREET ADDRESS	196 NORTH FOREST AVENUE HARTWELL GA 30643 V	□ DELETE	1.2 NAI 1.3 STR 1.4 CIT 2.1 TITI	ME REET ADDRESS TY-ST-ZIP	AUDITIONS/CHANGES TO OFFI		Change Addition
STREET ADDRESS CITY-ST-ZIP	196 NORTH FOREST AVENUE HARTWELL GA 30643 V GUARNELLA, LYNN B		1.2 NAI 1.3 STR 1.4 CIT 2.1 TIT 2.2 NAI	ME REET ADDRESS TY-ST-ZIP LE ME	ADDITIONS/CHANGES TO OFFI		
STREET ADDRESS CITY-ST-ZIP TITLE	196 NORTH FOREST AVENUE HARTWELL GA 30643 V GUARNELLA, LYNN B 196 NORTH FOREST AVENUE		1.2 NAI 1.3 STR 1.4 CIT 2.1 TIT 2.2 NAI 2.3 STR	ME REET ADDRESS IY-ST-ZIP LE ME REET ADDRESS	ADDITIONS/CHANGES TO OFFI		
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6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

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 or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears

SIGNATURE:

TITLE

NAME

STREET ADDRESS

in Block 12 or Block 13 if charged, or on an attachment with an address.

DELETE

706-856-2218

Change Addition