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

PROFIT CORPORATION ANNUAL REPORT

1997

NAMÉ

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY - ST - ZIP

CITY - S1 - ZIP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # H69396

(0)

COASTAL ELECTRIC SERVICE, INC.

FILED
Jan 31 1997 8:00am
Secretary of State

Change

Addition

A ABBITTA BATA BASAR TATAK AHING ABITA BATA BARAL BARAL BARAL BARAL BARAL BARAL BARAL

Principal Place of Business 127 INDUSTIAL ROAD UNIT 3 BIG PINE KEY FL 33043 US		Mailing Address 127 INDUSTIAL ROAD UNIT 3 BIG PINE KEY FL 33043-3410 US						
				3. Date Incorporated or Qualified 08/01/1985	3a, Date of Last Re 02/23/1996	port		
	lace of Business	2a. Mailing Address	***************************************	······································	4. FEI Number		olied For	
21		26			59-2572360		Applicable	
Suite, Apt. #, etc.		Suite, Apt #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required			
City & Stat	e	City & State			6. Election Campaign Financing	\$5.00 r		
23 Zip	Country	28	Countr		Trust Fund Contribution	Added to		
24	25	29	30	y	8. This corporation has liability for it Florida Statutes	ntan gibl e tax under s. Yes No	199.032,	
<u>1</u>	9. Name and Address of Current		1001		10. Name and Address of New Re			
NOF	RMAND, ROBERT JOSEPH		81	Name		F-10-11-11-11-11-11-11-11-11-11-11-11-11-		
20212 POINCE POAD			83	Street Add	Address (P.O. Box Number is Not Acceptable)			
DRI PINE NET PL 33043			83		· · · · · · · · · · · · · · · · · · ·			
				1 0''		1001 7 6		
			84	City		FL 85 Zip C	ode	
office or r	to the provisions of Sections 607.0502 egistered agent, or both, in the State in familiar with, and accept the obligation for the state of the section of th	of Florida. Such change was a tions of, Section 607.0505, Flo	authorized b orida Statute	y the corpora	poration submits this statement for the p tion's board of directors. I hereby accep	ourpose of changing its of the appointment as r	registered egistered	
12.	OFFICERS AND		13.	,				
TITLE	I V	DELETE	1.1 TITLE		ADDITIONOJO JANGEO TO OTTIO	☐ Change	Addition	
NAME	NORMAND, MELANIE ANN		1.2 NAME					
STREET ADDRESS	30312 PRINCE ROAD		1.3 STREE	T ADDRESS				
CITY - S1 - ZIP	BIG PINE KEY FL		1.4 CiTY-	ST-21P				
TITLE	P	DELETE	2.1 TiTLE			☐ Change	Addition	
NAME	NORMAND, ROBERT JOSEPH		2.2 NAME					
STREET ADDRESS	30312 PRINCE ROAD		2.3 STREE	T ADDRESS	· · ·			
CITY - S1 - ZIP	BIG PINE KEY FL		2. 4 CITY	-ST-ZIP				
TITLE		☐ DELETE	3.1 TITLE			Change	Addition	
NAME			3.2 NAME					
STREET ADDRESS		•		T ADDRESS				
CITY-ST-7IP		T NEI CTC	3.4 CITY	-\$T-ZIP			1 4 2 202	
TITLE		DELETE	4.1 TITLE			Change	Addition	
NAME			4, 2 NAM					
STREET ADDRESS				T ADDRESS				
CITY - ST - ZIP		DELETE	4.4 CITY-	ST-ZIP		Charen	Addition	
TiTLE			5.1 TITLE			Change	MODITION L	

6.4 CITY-ST-ZIP 14. I do 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.

5.2 NAME

6.1 TITLE

6.2 NAME

DELETE

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

CANIE NOLMAND