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**PROFIT** CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # J06362

GULF COAST SUBWAY, INC.

FILED

Feb 23 1998 8:00am

Secretary of State

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Mailin Bringing Place of this Bass Core Array HES CANCES TRAIL 3059 GILLE Breeze GULF BREEZE FL 32561 GULF BREEZE FL 32561 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 03/27/1986 2. Principal Place of Business 4. FEI Number Applied For 2a. Mailing Address 3509 GULF BREEZE PARKWAY 59-2681194 21 26 Not Applicable 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 8. Election Campaign Financing GULF BREEZE 23 28 Trust Fund Contribution Added to Fees Country Zip Country 8. This corporation owes or has paid the current year Intangible 32561 □ No 29 30 Personal Property Tax due June 30. Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name BOULTON, BRENDA J. 85 BAYBRIDGE PARK 3059 f Breeze Husy Street Address (P.O. Box Number is Not Acceptable) **GULF BREEZE FL 32561** 3509 GULF BREZZE PARKWAY GULF BREEZE 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 d Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE TITLE 1.1 TITLE ☐ Change ☐ Addition BOULTON, BRENDA J. NAME 1.2 NAME \_1468 GANGES TRAIL 1218 STREET ADDRESS 1.3 STREET ADDRESS **GULF BREEZE FL 32561** CITY-ST-ZIP 1.4 CITY-ST-ZIP PD DELETE TITLE 2.1 TITLE Change Addition HAGEMEYER, ROBERT N. NAME 2.2 NAME 125 HARBORAGE COURT STREET ADDRESS 2.3 STREET ADDRESS **CLEARWATER FL** CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE ☐ Change Addition TITLE 3.1 TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE 4.1 TITLE Change Addition TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

14. Thereby 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 is 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.

2/18/98

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