

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

FILED
Mar 07 1996 8:00 am
Secretary of State

DOCUMENT # J10783 (5)

1. Corporation Name

COASTAL SOUTHERN, INC.



Principal Place of Business

Mailing Address

~~RICHARD M. KNELLINGER~~
2400 ST. ANDREWS BLVD.
PANAMA CITY FL 32405

please delete this line

~~RICHARD M. KNELLINGER~~
2400 ST. ANDREWS BLVD.
PANAMA CITY FL 32405

please add this line in place of above deleted line

2. Principal Place of Business

2a. Mailing Address

21 d/b/a Sonny's Real P: + BBQ
Suite, Apt. #, etc.

26 d/b/a Sonny's Real P: + BBQ
Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified
04/23/1986

3a. Date of Last Report
03/06/1995

4. FEI Number
59-2698113

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

~~CASTELLO, WAYNE P.~~
515 N. MAIN ST., STE 300
GAINESVILLE FL 32601

please delete this and add new agent

81 Name
82 Timothy C. Campbell
83 Street Address (P.O. Box Number is Not Acceptable)
222 East Fourth Street
84 City
Panama City
85 Zip Code
FL 32401

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

Timothy C. Campbell

Attorney at Law
Timothy C. Campbell

2-27-96

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
VPD
LINDSEY, WAYNE
2400 ST. ANDREWS BLVD.
PANAMA CITY FL

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
PD
LINDSEY, GEORGE M., III
1631 LAGOON PL.
LAKE LAND FL

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
~~SB~~
~~MORGAN, DEBRA~~
~~220 N IOWA AVE~~
~~LAKE LAND FL~~

☒ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
STD
FLOYD, HOWARD H.
1800 S.W. 91 STREET
GAINESVILLE FL

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE ☒ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/23/96 (904) 763-5114

CR2E034 (12/95)