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PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # J48641

1. Corporation Name

GULF COAST REFRIGERATION CO., INC.

Principal Place of Business

4487 ASHTON RD  
P.O. BOX 21298  
SARASOTA FL 34233-2260

Mailing Address

4487 ASHTON RD  
P.O. BOX 21298  
SARASOTA FL 34233-2260

2. Principal Place of Business

21 Suite, Apt. #, etc

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 Suite, Apt. #, etc

27 City & State

28 Zip Country

29 30

9. Name and Address of Current Registered Agent

TODD, NORMAN  
4487 ASHTON ROAD  
(P.O. BOX 21298)  
SARASOTA FL 33583

81 Name

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

83

84 City

FL 85 Zip Code

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

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

(NOTE: Registered Agent signature required when first filing)

DATE

12. OFFICERS AND DIRECTORS

TITLE PST [ ] DELETE

NAME TODD, NORMAN  
STREET ADDRESS 4487 ASHTON RD  
CITY-ST-ZIP SARASOTA FL 33583

TITLE D [ ] DELETE

NAME TODD, NORMAN  
STREET ADDRESS 4487 ASHTON RD  
CITY-ST-ZIP SARASOTA FL 33583

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STREET ADDRESS [ ] DELETE  
CITY-ST-ZIP [ ] DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE [ ] Change [ ] Addition

12 NAME [ ] Change [ ] Addition

13 STREET ADDRESS [ ] Change [ ] Addition

14 CITY-ST-ZIP [ ] Change [ ] Addition

21 TITLE [ ] Change [ ] Addition

22 NAME [ ] Change [ ] Addition

23 STREET ADDRESS [ ] Change [ ] Addition

24 CITY-ST-ZIP [ ] Change [ ] Addition

31 TITLE [ ] Change [ ] Addition

32 NAME [ ] Change [ ] Addition

33 STREET ADDRESS [ ] Change [ ] Addition

34 CITY-ST-ZIP [ ] Change [ ] Addition

41 TITLE [ ] Change [ ] Addition

42 NAME [ ] Change [ ] Addition

43 STREET ADDRESS [ ] Change [ ] Addition

44 CITY-ST-ZIP [ ] Change [ ] Addition

51 TITLE [ ] Change [ ] Addition

52 NAME [ ] Change [ ] Addition

53 STREET ADDRESS [ ] Change [ ] Addition

54 CITY-ST-ZIP [ ] Change [ ] Addition

61 TITLE [ ] Change [ ] Addition

62 NAME [ ] Change [ ] Addition

63 STREET ADDRESS [ ] Change [ ] Addition

64 CITY-ST-ZIP [ ] Change [ ] Addition

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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-15-99

Signature: [ ]

99 FEB 19 PM 12:07

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/23/1986

4. FEI Number

59-2770951

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 owes the current year Intangible  
Personal Property Tax [ ] Yes [ ] No

10. Name and Address of New Registered Agent

0473102

CR2E034 (11/98)