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

PROFIT CORPORATION ANNUAL REPORT

1997

TILLE

NAME STREET ADORESS

TITLE

NAME

 $\mathfrak{M}\mathfrak{t}\mathfrak{t}$ 

THE

NAME

CITY-ST-7/P

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST 201

C/1Y - \$1 - 7/P



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J56680

(8)

COAST TO COAST AUCTIONS II, INC.

Principal Place of Business Mailing Addre  S GLENN A. BLACKHORE SCHENN A. E  445 FORESTWOOD LANE 445 FORESTW  MAITLAND FL 32751 MAITLAND FL			LACKMORE DOD LANE							
						· · · · · · · · · · · · · · · · · · ·	Incorporated or Qualified		te of Last R	eport
9 Principal	Place of Business	2a. Mailing Add	1000				2/1987	100/	01/1996	plied For
21		ļ,	26			}			t Applicable	
Suite, Apt. #, etc			Suite, Apt. #, etc.						\$8.75	
22		27				5. Certi	ficate of Status Desired		Fee Re	
City & Sta	ite	City & State	·····			1	ion Campaign Financing Fund Contribution		\$5.00 Added t	
Ζφ <b>24</b>	Zip         Country         Zip           25         29					8. This corporation has liability for intangible tax under s. 199 032, Florida Statutes Yes No				
	9. Name and Address of Cu	rrent Registered Agent		81	Name	10, Nam	e and Address of New Re	egistered /	igent	
	5 FORESTWOOD LANE ITLAND FL 32751			83	Street Add	dress (P.O. B	ox Number is Not Acceptal	ble)		
				84	City			FL	85 Zip (	Code
office or	to the provisions of Sections 607, registered agent, or both, in the S am familiar with, and accept the o	tate of Florida, Such char	nge was author	rized by	the cornors	poration sub- ation's board	mits this statement for the post directors. I hereby acce	purpose of pl the app	changing its pintment as	s registered registered
SIGNATION	Signar are typed or printed name of registers				nt signature requ	ired when reinstal		DATE		
12.	7 - 2	AND DIRECTORS		13.		ADDIT	IONS/CHANGES TO OFFK			
11716	D	ם ביו		1.1 TITLE	İ				Change	Addition
NAME	BLACKMORE, GLENN A.			1.2 NAME	1					
STREET ADORESS	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		•	1.3 STREET						
CITY-S1-ZIF	MAITLAND FL	AITLAND FL		1.4 CITY - ST - ZIP 2.1 TITLE					Change	Addition
HILF NAME		ں اِسا		2.1 HILLE 2.2 NAME	ł				CHRISTS	F"1 Modition
				2.2 NAME 2.3 STREET	ADDDECC					
STREET ADDRESS	·		1	2.5 SIMEET 2.6 CITY-5	1					
City St. 7IP	1			/ a CHY-5	1-/iF' L					

14. If 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 3 if changed or on any discorporation with an address.

3.1 TITLE

3.2 NAME

4.1 TITLE

4.2 NAME

5.1 TITLE

5.2 NAME 5.3 STREET ADDRESS

6.1 TITLE

62 NAME

3.3 STREET ADDRESS 3.4. CITY - ST - ZIP

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.4 CITY - ST - ZIP

6.3 STREET ADDRESS

DELETE

DELETE

DELETE

DELETE

e •

Change

Change

Change

Change

☐ Addition

Addition

Addition

Addition

**FILED** 

May 02 1997 8:00am

Secretary of State