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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT #

(6)

FILED Jun 11 1998 8:00am Secretary of State

EMERA Principal Plac	LD COAST MARINE INCOR	RPORATED Mading Address			
4610 SAULEY RD. PENSACOLA FL \$2526		4610 SAULEY RD.		·	
		PENSACOLA FL 32505-1830		DO NOT WRITE IN THIS SPACE	
US		US		3. Date Incorporated or Qualified	IIS SPACE
				05/29/1987	
2. Principal Place of Business		2a. Mailing Address		4. FEI Number	Applied For
Suite, Apt. #, etc		26	······································	59-28 12546	Not Applicable
22 Suite, Apt.	ff, GLC	Suite, Apt #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	0	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zipi	Country	8. This corporation owes or has paid the	current year Intangible Yes No
24	25 Name and Address of Curre	29 nt Registered Agent	30	Personal Property Tax due Jurie 30. 10. Name and Address of New Registere	
RIZ	ZUTI, ROBERT JOHN		81 Name		
5081 HIGH POINTE DR			82 Street Add	fress (P.O. Box Number is Not Acceptable)	
PEI	NSACOLA FL 32505			7033 (1.0. Box Hamber 15 Hot 7 Goophable)	
i			83		
1			84 City		85 Zip Code
11 Pursuant	to the provisions of Sections 607 05	12 and 607 1508. Florida State	itos the above-named cor	poration submits this statement for the purpose	
office or r	egistered agent, or both, in the State or familiar with, and accept the oblic	e of Florida, Such change was	authorized by the corpora	poration submits this statement for the purpose tion's board of directors. I hereby accept the a	appointment as registered
SIGNATURE	na manimum water, and meserspatial count	patienta in Occident (O) (A) (O), (onda cialdies.		
	Signature: Typed or ported name of registeres(lag		IF Registered Agent signature requ	· · · · · · · · ·	
12.	OFFICERS AN	ID DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12 Change Addition
NAME	rizzuti, robert John		13 TITLE 12 NAME		C) Change C Abouton
STREET ADDRESS	\$081 HIGH POINTE DR		1.3 STREET ADDRESS		
CITY+S1-ZIP	PENSACOLA FL		1.4 CITY-ST-ZIP		
TITLE	81	DELETE	2.1 TITLE		Change Addition
NAME	RIZZUTI, BRENDA		2.2 NAME		
STREET ADDRESS	50 81 HIGH POINTE DR PE NSACOLA FL		2.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	PENSACULA PL	DELETE	2. 4 CITY - ST - ZIP 3.1 THLE		Change Addition
NAME		_ peech	3.2 NAME		T OHENBO T MORROLL
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP	_		3.4 CITY-ST-7IP		
TITLE		DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DILFTE	4.4 CITY - ST - ZIP - 5.1 TITLE		Change Addition
NAME		E MOR	5.1 TITLE 5.2 NAME		En animale En vocition
STREET ADDRESS			5.3 STREET ADDRESS		•
CITY-ST-ZIP			5.4 City - ST - ZiP		
TITLE		DELETE	6 1 TITLE		Change Addition
NAME			62 NAME		
STREET ADDRESS			63 STREET ADDRESS		
CITY-ST-ZIP	_		64 CITY-ST-ZIP		

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 trusted 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.

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