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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # K29500

(1)

COASTAL UNDERGROUND UTILITIES, INC.

FILED May 13 1997 8:00am Secretary of State

Principal Plac	Mailing Address	Address						
4009 NW 73 AV	VE. 38 FI 3 3065	4009 NW 73 AVE. CORAL SPRINGS FL 33065						
	36 FE 93003	OUNAL OFFINGS FL 33003	2141					
					 Date Incorporated or Qualified 07/27/1988 	3a. Date 03/08/		Report
· ·	lace of Business	2a, Mailing Address			4. FEI Number			oplied For
Suite, Apt.	# alo	26			65-0057328	Not Applicable		
22		Suite, Apt. #, etc.	27		5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & Stat	e	City & State			Election Campaign Financing Trust Fund Contribution			May Be to Fees
Zip 24	Country 25	7ip 29	Country 30	у	8. This corporation has liability for intengible tax under s. 199.032, Florida Statutes			
	9. Name and Address of Curre				10. Name and Address of New Re			
HOL	MES, CRAIG		81	Name				
4009 NW 73 AVE.			82	82 Street Address (P.O. Box Number is Not Acceptable)				
COR	VAL SPRINGS FL 33065				,	· ,		
			63					
•			84	City		FL	5 Zip	Code
11. Pursuant	to the provisions of Sections 607.050	02 and 607.1508, Florida Statute	s, the abov	e-named cor	poration submits this statement for the partion's board of directors. I hereby acce		L anging i	ls registered
office of r agent. I a	egistered agent, or both, in the State om familiar with, and accept the oblig	r of Horida. Such change was a lations of, Section 607.0505, Flo	uthorized b rida Statute	y the corpora is.	ition's board of directors. I hereby acce	pt the appoint	ment as	registered
SIGNATURE								
	Signature, typed or printed name of registered ag			ent signature requ	ifed when reinstating)	DATE		
12.	D OFFICERS AN	D DIRECTORS	13.		ADDITIONS/CHANGES TO OFFI		RECTOR Change	RS IN 12
NAME	HOLMES, CRAIG	El berre	1.2 NAME				Grange	LI Montion
STREET ADDRESS	4009 NW 73 AVE		1.3 STREET ADDRESS					
CITY-ST-ZIP	CORAL SPRINGS FL	L CODINOC EL		S1-ZIP				
TITLE	D	DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS				Change	Addition
ŅAME	HOLMES, CYNTHIA							
STREET ADDRESS	4009 NW 73 AVE							i
CITY-ST-ZIP	CORAL SPRINGS FL		2. # CITY -	ST-ZIP				
TITLE		DELETÉ	3.1 TITLE				Change	Addition
NAME		•	3.2 NAME					
STREET ADDRESS			3.3 STREE	T ADDRESS				
CITY-ST-ZIP	, , , , , , , , , , , , , , , , , , , ,		3.4. CITY-	ST-ZIP				
TITLE		☐ DELF1E	4.1 TITLE				Change	Addition
NAME			4. 2 NAME					
STREET ADDRESS				I ADDRESS				
CITY-ST-ZIP		DELETE	4.4 CHY- 3	S1 - ZIP	<u> </u>		Chacas	Antalities
TITLE		L. Vitti	5.1 TITLE			لــا	Change	L Addition
NAME OTDEET ADDRESS			5.2 NAME	LACODORDO				
STREET ADDRESS		•		I ADDRESS				
CITY-ST-ZIP TITLE		DELETE	5.4 CHY-1	51-712			Change	Addition
NAME		LJ otter	62 NAME]		u	onany c	AUUIIIUII
STREET ADDRESS				I ADDRESS				
CITY+ST+ZIP			6.4 CITY-5					
14. I do heret	by certify that the information supplie	d with this filing does not qualify	/ for the exe	mption state	d in Section 119.07(3)(i), Florida Statute	s. I further ce	rtify that	the
informatio	n indicated on this annual report or :	supplemental annual report is tra the receiver or trustee empowe	ue and acci ered to exec	urate and tha	t my signature shali have the same lega ort as required by Chapter 607, Florida s	al effoct as if r	กลที่ค.เมก	dor path: that