FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

'95 APR 25 AM 10:37

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # K73018 (9)

1. Corporation Name

EAST COAST SPECIALTIES, INC.

Principal Place of Business	Mailing Address
C/O RICHARD W. NORTON JR. 1733 S.W. BILTMORE STREET PORT ST.LUCIE FL 34984	C/O RICHARD W. NORTON JR. 1733 S.W. BILTMORE STREET PORT ST.LUCIE FL 34984

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 03/15/1989
3a. Date of Last Report: 05/01/1994

2. Principal Place of Business — 21
2a. Mailing Address — 26
Suite, Apt. #, etc. — 22 / 27
City & State — 23 / 28
Zip — 24 / Country — 25 / Zip — 29 / Country — 30

4. FEI Number: 65-0125504 ☐ 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

9. Name and Address of Current Registered Agent

NORTON, RICHARD W. JR.
1733 S.W. BILTMORE STREET
PORT ST. LUCIE FL 34984

10. Name and Address of New Registered Agent

81 Name: N. Dean Kohl, Jr.
82 Street Address (P.O. Box Number is Not Acceptable): 50 S.E. Kindred Street
83 Suite #107
84 City: Stuart FL 85 Zip Code: 34994

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 _____ DATE Apr 21, 1995
Signature, typed or printed name of registered agent and title if applicable. NOTE: Registered agent signature required when reinstating.

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	11 TITLE		☐ Change ☐ Addition
NAME	NORTON, RICHARD W. JR.	12 NAME		
STREET ADDRESS	603 BETH COURT	13 STREET ADDRESS		
CITY-ST-ZIP	PTL. ST. LUCIE FL	14 CITY-ST-ZIP		
TITLE	[redacted]	21 TITLE		☐ Change ☐ Addition
NAME		22 NAME		
STREET ADDRESS		23 STREET ADDRESS		
CITY-ST-ZIP		24 CITY-ST-ZIP		
TITLE	ST	31 TITLE		☐ Change ☐ Addition
NAME	HALL, MICHAEL A	32 NAME		
STREET ADDRESS	1477 SW GILROY	33 STREET ADDRESS		
CITY-ST-ZIP	PORT ST. LUCIE FL	34 CITY-ST-ZIP		
TITLE	D	41 TITLE		☐ Change ☐ Addition
NAME	NORTON, CHERYL	42 NAME		
STREET ADDRESS	603 BETH COURT	43 STREET ADDRESS		
CITY-ST-ZIP	PORT ST. LUCIE FL	44 CITY-ST-ZIP		
TITLE	[redacted]	51 TITLE		☐ Change ☐ Addition
NAME		52 NAME		
STREET ADDRESS		53 STREET ADDRESS		
CITY-ST-ZIP		54 CITY-ST-ZIP		
TITLE	D	61 TITLE		☐ Change ☐ Addition
NAME	HALL, SHIELA A.	62 NAME		
STREET ADDRESS	1477 SW GILROY	63 STREET ADDRESS		
CITY-ST-ZIP	PORT ST. LUCIE FL	64 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 — Date — Electronic Filing #

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