

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sherida B. Mortimer
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **L87111**

(5)

1. Corporation Name

COASTAL REALTY SALES, INC.



Principal Place of Business

**3401 N TAMiami TRAIL
SUITE 208
NAPLES FL 33940
US**

Mailing Address

**3401 N TAMiami TRAIL
SUITE 208
NAPLES FL 33940
US**

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

9. Name and Address of Current Registered Agent

**GAUSE, PEYTON
2 N TAMiami TRAIL, 1 SARASOTA TR STE 404
SARASOTA FL 34236**

3. Date Incorporated or Qualified
07/11/1990

3a. Date of Last Report
02/13/1995

4. FEI Number
59-2972569

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

10. Name and Address of New Registered Agent

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 607.0602 and 607.1506, 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 this appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0602, Florida Statutes.

SIGNATURE

DATE

12. OFFICERS AND DIRECTORS

PS
NAME **BEVINS, DON**
STREET ADDRESS **3401 N TAMiami TRAIL, STE. 208**
CITY, ST, ZIP **NAPLES FL**

DVT
NAME **STARR, CHARLES L.**
STREET ADDRESS **4030 GULF OF MEXICO DR.**
CITY, ST, ZIP **LONGBOAT KEY FL**

S
NAME **BEVINS, DONALD**
STREET ADDRESS **4030 GULF OF MEXICO DR**
CITY, ST, ZIP **LONGBOAT KEY FL**

NAME
STREET ADDRESS
CITY, ST, ZIP

NAME
STREET ADDRESS
CITY, ST, ZIP

NAME
STREET ADDRESS
CITY, ST, ZIP

13.

1. NAME
2. NAME
3. STREET ADDRESS
4. CITY, ST, ZIP
5. NAME
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15. STREET ADDRESS
16. CITY, ST, ZIP
17. NAME
18. NAME
19. STREET ADDRESS
20. CITY, ST, ZIP

ADDITIONS-CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

**500001764055
-04/01/96--01022--021
***200.00**

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/26/96

SG 3-30-96

CR2E034 (12/95)