FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name N38566

(8)

COASTAL RESEARCH & EDUCATION, INC.

						. 81818 21818 21831 21811 21811 21811 1881
Principal Place of Business Mailing Address				n hamstedt man stedt ental milita kitsik ditt	ALMSE BIEIL ASON AIDN BIAN BIAN 1900	
14630 S.W. 144 TERRACE 14630 S.W. 144 TERMIAMI FL 33186 MIAMI FL 33186-56						
					3. Date Incorporated or Qualified 06/08/1990	3a. Date of Last Report 04/11/1996
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number	Applied For
21		26			65-0235563	Not Applicable
Suite, Apt. 22		Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Count	ry	8. This corporation has liability for inte	
24	25		30		Florida Statutes	
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent 81 Name		
CACTELL	LO CADMENT LD		L			
CASTELLO, CARMEN, J.D. 2950 S.W. 87TH AVENUE				2 Street	Address (P.O. Box Number is Not Acceptable))
MIAMI FL 33165			ä	3		
17112 3011) 1 (2 00100					
			8	4 City		FL 85 Zip Code
11. Pursuant	to the provisions of Sections 617.050	2 and 617.1508, Florida Statute	s, the abo	ve-named	corporation submits this statement for the pur	pose of changing its registered
agent. La	egistered agent, or both, in the State m lamiliar with, and accept the oblig	of Florida. Such change was a ations of, Section 617.0503, Flo	iutnorized irida Statut	by the cor, es.	corporation submits this statement for the pur poration's board of directors. I hereby accept t	he appointment as registered
SIGNATURE	Carmen Co	votello CAR	MEL) CA	15TELLO 4:289	77
12.	Signature typed or printed name of registered age OFFICERS AN			geni signatura	e required when reinstating)	DATE
TITLE	D OFFICERS AIV	DELETE	13. 1.1 TITLE	:	ADDITIONS/CHANGES TO OFFICER	Change Addition
NAME	BAKER, KANE	1.2 N			BAKER, KANE	J.
STREET ADDRESS	201 N. FLAGLER DR.	FR NA		ET ADDRESS	1246 NORTHLAKE WAY	address only
CITY - ST - ZIP	WEAT DALLA BEACH EL			- ST- Z)P	PARM BEACH, FL	,
TITLE	S	☐ DELETE	2.1 TITLE			Change Addition
NAME	IGOE, JOHN G.		2.2 NAM	E		
STREE1 ADDRESS	250 ROYAL PALM WAY			ET ADDRESS		
CITY - ST - ZIP			2.4 C(T)	-ST-ZIP		
TITLE	PD LINDENSAN MENINON	☐ DELETE				Change Addition
NAME Protes Abbrece	AAAAA AMA AAA TERRARE		3.2 NAM			
STREET ADDRESS	MIAMI FL			ET ADDRESS		
CITY-ST-ZIP TITLE	D	DELETE	3.4. CITY 4.1 TITLE		P	Change Addition
NAME	SCHRAFT, JUDY	4.2			SCHRAFT, JUDY	#
STREET ADDRESS				ET ADORESS	325 CRESCENT DR.	of sadies only.
CITY-S1-ZIP	WEST PALM BEACH FL		4.4 CITY		W. PALM BEACH, FL	
TITLE	D	☐ DELETE	5.1 TITLE		APD - VP	Change Addition
NAME	ROBERT CALLAHAN	>	5.2 NAM	E	1	A 1. 18 1. 1.
STREET ADDRESS	15053 SW 142 CT.		5.3 STRE	ET ADDRESS		of title may.
CITY-ST-ZIP	MIAMI FL		5.4 CITY	- ST- ZIP		
TITLE .	D	DELETE	6.1 TITLE		D	Change X Addition
NAME	STEPHEN BASS	•	6.2 NAM	E	JUDY CHANDIER	(ديوزد بيار

14. I do hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 149.07(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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

64 CITY-ST-ZIP

6.3 STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

1801 N. OCEAN BLVD.

BOCA RATON FL

JUDY CHANDLER

14374 138 AVE.

305-256-9508

FILED

May 12 1997 8:00am

Secretary of State

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