

**2004 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Feb 04, 2004 8:00 am**  
**Secretary of State**

02-04-2004 90073 024 \*\*\*158.00

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1. Entity Name

COAST TO COAST CONSTRUCTORS, INC



Principal Place of Business

604 NEW WARRINGTON ROAD  
PENSACOLA, FL 32506

Mailing Address

604 NEW WARRINGTON ROAD  
PENSACOLA, FL 32506

64001061



01222004

No Chg-P

CR2E034 (10/03)

4. FEI Number

59-3749181

Applied For

Not Applicable

5. Certificate of Status Desired

☒ \$8.75 Additional  
Fee Required

**DO NOT WRITE IN THIS SPACE**

6. Name and Address of Current Registered Agent

LOWRY, GARY  
~~365 GULFVIEW LANE~~ 370 Gulfview Lane  
PENSACOLA, FL 32507

**DO NOT WRITE  
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

*Gary Lowry*  
Signature, typed or printed name of registered agent and title if applicable.

*Gary Lowry*  
(NOTE: Registered Agent Signature required when reinstating)

1/22/04  
DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE *VP President*  
NAME LOWRY, GARY W  
STREET ADDRESS 370 GULFVIEW LANE  
CITY-ST-ZIP PENSACOLA, FL 32506

TITLE *P*  
NAME RAIDER, MICHAEL G  
STREET ADDRESS ~~4546 TERRA ROJA DRIVE~~  
CITY-ST-ZIP ~~COLORADO SPRINGS, CO 80926~~

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**DO NOT WRITE  
IN THIS SPACE**

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Gary Lowry*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/22/04  
Date

850 458 5121  
Daytime Phone #