

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 24, 2006 8:00 am
Secretary of State

04-24-2006 90464 030 ***150.00

DOCUMENT # P04000084310

1. Entity Name
COAST 2 COAST CONSTRUCTION, INC.



Principal Place of Business
**940 GOLDENROD AVE
MARCO ISLAND, FL 34145 US**

Mailing Address
**940 GOLDENROD AVE
MARCO ISLAND, FL 34145 US**

50015895



02272006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-1254432

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**HEWEKER, CHARLES D JR.
940 GOLDENROD AVE
MARCO ISLAND, FL 34145**

**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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

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

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	HEWEKER, CHARLES D JR.
STREET ADDRESS	940 GOLDENROD AVE
CITY-ST-ZIP	MARCO ISLAND, FL 34145
TITLE	Vice President
NAME	Charles D. Heweker, Sr.
STREET ADDRESS	940 Goldenrod Ave Marco Island FL 34145
CITY-ST-ZIP	
TITLE	Philip C. Lopez - Secretary
NAME	1460 Biscayne Way
STREET ADDRESS	Marco Island FL 34145
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 exemptions contained in Chapter 119, 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Charles Heweker
Charles Heweker

Date

4-3-06 289-389 9953

Daytime Phone #