

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P92000011738

1. Corporation Name
GULF COAST MOBILITY, INC.

Principal Place of Business 2403 TRADE CENTER WAY 7 NAPLES FL 33942 US		Mailing Address 2403 TRADE CENTER WAY 7 NAPLES FL 33942 US	
2. Principal Place of Business 21 1750 J&C Blvd. Suite, Apt. #, etc. 22 #10		2a. Mailing Address 26 1750 J&C Blvd Suite, Apt. #, etc. 27 #10	
City & State 23 Naples, FL		City & State 28 Naples, FL	
Zip 24 34109	Country 25 Collier	Zip 29 34109	Country 30 Collier

9. Name and Address of Current Registered Agent

LANE, L.J. JR
445 COUNTRY HOLLOW CT., B-106
NAPLES FL 33942

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 607.0502 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

(Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PSD	<input type="checkbox"/> DELETE	1.1 TITLE
NAME	LANE, L J JR		1.2 NAME
STREET ADDRESS	445 COUNTRY HOLLOW CT., B-106		1.3 STREET ADDRESS
CITY-ST-ZIP	NAPLES FL		1.4 CITY-ST-ZIP
TITLE	VTD	<input type="checkbox"/> DELETE	2.1 TITLE
NAME	LANE, JOAN S		2.2 NAME
STREET ADDRESS	445 COUNTRY HOLLOW CT., B-106		2.3 STREET ADDRESS
CITY-ST-ZIP	NAPLES FL		2.4 CITY-ST-ZIP
TITLE		<input type="checkbox"/> DELETE	3.1 TITLE
NAME			3.2 NAME
STREET ADDRESS			3.3 STREET ADDRESS
CITY-ST-ZIP			3.4 CITY-ST-ZIP
TITLE		<input type="checkbox"/> DELETE	4.1 TITLE
NAME			4.2 NAME
STREET ADDRESS			4.3 STREET ADDRESS
CITY-ST-ZIP			4.4 CITY-ST-ZIP
TITLE		<input type="checkbox"/> DELETE	5.1 TITLE
NAME			5.2 NAME
STREET ADDRESS			5.3 STREET ADDRESS
CITY-ST-ZIP			5.4 CITY-ST-ZIP
TITLE		<input type="checkbox"/> DELETE	6.1 TITLE
NAME			6.2 NAME
STREET ADDRESS			6.3 STREET ADDRESS
CITY-ST-ZIP			6.4 CITY-ST-ZIP

14. 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 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, with all other like empowered.

SIGNATURE: *John Salvatore Rejonnis, Lane 3/16/99 941-591-8990*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED
Mar 22, 1999 8:00 am
Secretary of State

03-22-1999 90119 022 ***150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 12/15/1992	<input type="checkbox"/> Applied For <input checked="" type="checkbox"/> Not Applicable
4. FEI Number 65-0379193	<input type="checkbox"/> \$8.75 Additional <input type="checkbox"/> Fee Required
5. Certificate of Status Desired <input type="checkbox"/>	<input type="checkbox"/> \$5.00 May Be Trust Fund Contribution <input type="checkbox"/> Added to Fees
6. Election Campaign Financing <input type="checkbox"/>	<input type="checkbox"/> This corporation owes the current year Intangible Personal Property Tax. <input type="checkbox"/> Yes <input type="checkbox"/> No

9. Name and Address of Current Registered Agent		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		

CR2E034 (11/98)