

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Moulton
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000039267 (8)

1. Corporation Name

COAST TO COAST MARKETING, INCORPORATED

Principal Place of Business

28870 US 19 NORTH
SUITE 400-A
CLEARWATER FL 34621

Mailing Address

28870 US 19 NORTH
SUITE 400-A
CLEARWATER FL 34621

2. Principal Place of Business

21 State, Apt. #, etc.

22 City & State

23 Zip

Country

24

25

2a. Mailing Address

26 State, Apt. #, etc.

27 City & State

28 Zip

Country

29

30

9. Name and Address of Current Registered Agent

LACASSE, LINDER B
28870 US 19 NORTH
SUITE 400-A
CLEARWATER FL 34621

3. Date Incorporated or Qualified
06/03/1993

3a. Date of Last Report
01/31/1995

4. FEI Number
59-3166671

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 607.1402 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 firm in will, and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE LINDER B. LACASSE
OWNER

1-18-96

12. OFFICERS AND DIRECTORS

12a. NAME
DP
LACASSE, LINDER B
28870 US 19 NORTH SUITE 400-A
CLEARWATER FL 34621

12b. NAME
VST
LACASSE, LINDER B
28870 US 19 NORTH SUITE 400-A
CLEARWATER FL 34621

12c. NAME
LACASSE, LINDER B
28870 US 19 NORTH SUITE 400-A
CLEARWATER FL 34621

12d. NAME
LACASSE, LINDER B
28870 US 19 NORTH SUITE 400-A
CLEARWATER FL 34621

12e. NAME
LACASSE, LINDER B
28870 US 19 NORTH SUITE 400-A
CLEARWATER FL 34621

12f. NAME
LACASSE, LINDER B
28870 US 19 NORTH SUITE 400-A
CLEARWATER FL 34621

12g. NAME
LACASSE, LINDER B
28870 US 19 NORTH SUITE 400-A
CLEARWATER FL 34621

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

13a. NAME
13b. STREET ADDRESS
13c. CITY, ST, ZIP

13d. NAME
13e. STREET ADDRESS
13f. CITY, ST, ZIP

13g. NAME
13h. STREET ADDRESS
13i. CITY, ST, ZIP

13j. NAME
13k. STREET ADDRESS
13l. CITY, ST, ZIP

13m. NAME
13n. STREET ADDRESS
13o. CITY, ST, ZIP

13p. NAME
13q. STREET ADDRESS
13r. CITY, ST, ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information included 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 recorder or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Box # 12 or Block 12 if changed, or on an addition with an address.

SIGNATURE LINDER B. LACASSE
OWNER

1/18/96 813
791-6353

CR2E034 (12/95)