

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 17, 2005 8:00 am
Secretary of State

02-17-2005 90023 001 ***158.75

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1. Entity Name
**ATLANTIC COASTAL ELEVATOR SALES & SERVICE
INCORPORATED**



Principal Place of Business
**123 E. MASON
DAYTONA BEACH, FL 32117**

Mailing Address
**123 EAST MASON AVE.
DAYTONA BEACH, FL 32117 US**



02112005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2407142-59-3253870 Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**FISCH, DAVID
1489 NAPPA DRIVE
PORT ORANGE, FL 32124**

**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, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	VCEO
NAME	FISCH, DAVID
STREET ADDRESS	1489 NAPPA DRIVE
CITY-ST-ZIP	PORT ORANGE, FL 32124
TITLE	P
NAME	NELSON, LARRY
STREET ADDRESS	501 SOUTH LANVALE AVE.
CITY-ST-ZIP	DAYTONA BEACH, FL 32114
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:

DAVID FISCH VP CEO
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-13-05
Date

381252-8483
Daytime Phone #