

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

**CORPORATION
ANNUAL REPORT
1995**



DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

95 MAR 29 AM 11:48

DOCUMENT # P94000056144 (6)

1. Corporation Name

COAST WIRE AND CABLE CORPORATION

Principal Place of Business

2925 HARNAGE RD.
AVON PARK FL 33825

Mailing Address

2925 HARNAGE RD.
AVON PARK FL 33825

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/28/1994

3a. Date of Last Report

4. FEI Number

65-0508658

Applied For

Not Applicable

5. Certificate of Status Desired

☒ **3x**

**\$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

9. Name and Address of Current Registered Agent

**RHOADES, CLIFFORD R
227 N. RIDGEWOOD DR.
SEBRING FL 33870**

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 607.0502 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

Corporation Registered or qualified under the laws of the State of Florida

Registered Agent (signature required when new address)

DATE

12. OFFICERS AND DIRECTORS

111 TITLE
NAME
STREET ADDRESS
CITY ST ZIP
**D
MORMILE, VICTOR S
% 2925 HARNAGE RD.
AVON PARK FL 33825**

112 TITLE
NAME
STREET ADDRESS
CITY ST ZIP

113 TITLE
NAME
STREET ADDRESS
CITY ST ZIP

114 TITLE
NAME
STREET ADDRESS
CITY ST ZIP

115 TITLE
NAME
STREET ADDRESS
CITY ST ZIP

116 TITLE
NAME
STREET ADDRESS
CITY ST ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

111 TITLE ☐ Change ☐ Addition

112 NAME

113 STREET ADDRESS

114 CITY ST ZIP

211 TITLE ☐ Change ☐ Addition

212 NAME

213 STREET ADDRESS

214 CITY ST ZIP

221 TITLE ☐ Change ☐ Addition

222 NAME

223 STREET ADDRESS

224 CITY ST ZIP

231 TITLE ☐ Change ☐ Addition

232 NAME

233 STREET ADDRESS

234 CITY ST ZIP

241 TITLE ☐ Change ☐ Addition

242 NAME

243 STREET ADDRESS

244 CITY ST ZIP

251 TITLE ☐ Change ☐ Addition

252 NAME

253 STREET ADDRESS

254 CITY ST ZIP

261 TITLE ☐ Change ☐ Addition

262 NAME

263 STREET ADDRESS

264 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 Sections 110.07(3)(b), 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.

SIGNATURE:

VICTOR S MORMILE

PRESIDENT

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-3-95

013 471-2752