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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000059997 (4)

GULFCOAST FEDUP, INC.

FILED May 06 1998 8:00am Secretary of State



Principal Place of Business Mailing Address							
1435 GEORGETOWN DR 1435 GEORGETOWN DR 8ARASOTA FL 34232 SARASOTA FL 34232			1	DO NOT WRITE IN THIS SPACE		S SPACE	
					3. Date Incorporated or Qualified		
					08/15/1994		
	2. Principal Place of Business 2a. Mailing Addre		ess		4. FEI Number	Applied For	
21					65-0528254	Not Applicable	
Suite, Apt. #, etc. Suito, Apt. #, etc. 27				5. Certificate of Status Desired	\$8.75 Additional Fee Required		
		City & State			6. Election Campaign Financing		
23 28		- -¬ ·			Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip	Country Zip		Coun	try	8. This corporation owes or has paid the o		
24	25	29	30		Personal Property Tax due June 30.	Yes No	
	9. Name and Address of Curr	ent Registered Agent			10. Name and Address of New Registers	d Agent	
KIN	IG, ROGER C			Name			
1435 GEORGETOWN DR SARASOTA FL 34232			la la	32 Street Add	Iress (P.O. Box Number is Not Acceptable)		
			_				
				33			
			Ī	City		85 Zip Code	
				<u> </u>	F	L 1 1	
Office or r	to the provisions of Soctions 607.0 egistered agent, or both, in the Sta m familiar with, and accept the ob	ite of Florida. Such change was	authorized	by the corpora	poration submits this statement for the purpose tion's board of directors. I hereby accept the ag	of changing its registered pointment as registered	
SIGNATURE							
	Signature, typed or printed name of registered			Agent signatura requi	ired when reinslating) DATE	ID DIDECTORS W. 45	
12.	D OFFICERS A	ND DIRECTORS DELETE	13.	F	ADDITIONS/CHANGES TO OFFICERS AF	Change Addition	
NAME	KING, ROGER C		1.2 NAM	·		D Swings C 1 results	
STREET ADDRESS	1435 GEORGETOWN DR			EET ADDRESS			
CITY-ST-ZIP	SARASOTA FL 34232			'-ST-ZIP			
TITLE	D	DELETE	2.1 TITL			Change Addition	
NAME	DUFFEY, RONALD N		2.2 NAM	l			
STREET ADDRESS				EET ADDRESS			
CITY-ST-ZIP	5.55.65T4 F1 6.4655			Y-ST-ZIP			
TITLE			3 1 TITL	~~~~		Change Addition	
NAME			3 2 NAM	1E Į		j	
STREET ADDRESS			3.3 STR	EET ADDRESS			
CITY-ST-ZIP		<u></u>	3.4. CIT	Y-S1-ZIP			
TITLE	DELETE 4.1		4.1 TITL	E _		Change Addition	
NAME .			4. 2 NAI	A€ Í			
STREET ADDRESS			4.3 STR	EET ADDRESS			
CITY-ST-ZIP				'-ST-ZIP			
TITLE		DELETE	5.1 TITL	ſ		Change Addition	
NAME			5.2 NAM	lé [
STREET ADDRESS			5.3 STRI	EET ADDRESS			
CITY-ST-ZIP		——————————————————————————————————————		'-ST-ZIP			
TITLE		☐ DELETE	6.1 TITL			Change Addition	
NAME			6.2 NAM	HE			
STREET ADDRESS				EET 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 of 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 or an attachment with an address.

SIGNATURE: