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

**PROFIT CORPORATION ANNUAL REPORT** 

**19**98



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000030292 (3)

GULF COAST HOME AND PROPERTY WATCH, INC.

## **FILED** May 06 1998 8:00am Secretary of State



Principal Place	of Business			110	AIIANI 400 ININA BIIII AAIII 4011	BOTTO BOTON INCIDE	tang nem	16119 1101 1681		
1507 CAPE CO	DRAL PARKWAY W	1507 CAPE CORAL	1507 CAPE CORAL PARKWAY W							
#1		#1	#1 CAPE CORAL FL 33914			DO NOT WE	ITE IN THIC C	DACE		
CAPE CORAL US	FL 33914	CAPE CORAL FL 3				DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified				
US		03					u			
2. Principal Pi	ace of Business	2a. Mailing Addres	\$		4. FEI N	18/1995 Jumber		~	Applied For	
21	act of Doubling	26			l l	5-0653525		h	Not Applica	
Suite, Apt.	#, etc.	· · · · · · · · · · · · · · · · · · ·	Suite, Apt. #, etc.			•			5 Additional	
22		— <u> </u>	27			ficate of Status Desired			Required	
City & State	)	City & State	<b>↓ ↓</b>			ion Campaign Financing		\$5.0	0 May Be	
23		28	28			Trust Fund Contribution Added to Fees				
Zip	Country	Zip	Zip Country			8. This corporation owes or has paid the current year Intangible				
24	25					Personal Property Tax due June 30.  Yes No				
	9. Name and Address of Cui	rrent Registered Agent				e and Address of New	Registered A	gent		
MIL	ES, PETER E			81 Nam	ne					
	7 CAPE CORAL PARKWAY V	٧		<b>82</b> Stree	et Address (P.O. Bo	Address (P.O. Box Number is Not Acceptable)				
#1	•									
CAF	E CORAL FL 33914			83						
	•			84 City				<b>85</b> Zi	ip Code	
							FL			
office or re	o the provisions of Sections 607. egistered agent, or both, in the Si m familiar with, and accept the ob-	tate of Florida. Such change	was authorized	d by the co	ed corporation subrorporation's board	mits this statement for the of directors. I hereby ac	e purpose of cept the appo	changing intment r	j its register as registere	ed d
SIGNATURE										
	Signature, typed or printed name of registered			f Agent signat	ture required when reinstat		DATE			6
12.	····	AND DIRECTORS  DELE	13.		ADDIT	IONS/CHANGES TO OF	····			tion of
TITLE	D	L) DELE					ı	Change	eAOUII	1001
NAME	MILES, PETER	ACRAS ARE NO.	1.2 N/							100
STREET ADDRESS	1507 CAPE CORAL PARKY	VAT W #1		REET ADDRES	S					
CITY-ST-ZIP TITLE	CAPE CORAL FL D	DELE		TY-ST-ZIP	<del></del>	·		Change	e	
NAME	MILES, PETRA		2.2 NA					Criange	2,00%	1011
STREET ADDRESS	1507 CAPE CORAL PARKY	NAV NI #4		reet addres:						
	CAPE CORAL FL	TAL W # I		NEET ADUNES: ITY-ST-ZIP	°					ļ
CITY-ST-ZIP TITLE	VALE OUNAL FL	DELE				·		Change	e 🔲 Addit	tion
NAME			3.2 NA				•	_ •		
STREET ADDRESS				REET ADDRES:	s					
CITY-ST-ZIP				TY-ST-ZIP						
TITLE		DELE			<del> </del>	<del>-</del>		Change	e 🔲 Addit	tion
NAME			4 2 N	AME						
STREET ADDRESS			4.3 ST	REET ADDRESS	s					
CITY-ST-ZIP				TY-ST-ZIP						
TITLE		DELE						Change	e Addit	tion
NAME			5.2 NA	ME				-		
STREET ADDRESS			5 3 ST	REET ADDRESS	s					
CITY-ST-ZIP			5400	IY-ST-ZIP						
TITLE		☐ DELE						Change	e Addit	tion
NAME			6.2 NA	ME						
STREET AODRESS			6.3 ST	REET ADDRESS	s					
CITY-ST-ZIP				TY-ST-ZIP						
		<del></del>								

Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. If further certify that the information indicated on this annual report or supplicated 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 trusted 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.