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

CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

P95000063651 (0) **DOCUMENT #** COASTAL FLOORING AND TILE, INC. Mailing Address Principal Place of Business 217-A E. INTENDENCIA STREET 217-A E. INTENDENCIA STREET PENSACOLA FL 32501 PENSAGOLA FL 32501 3a. Date of Last Report 3. Date Incorporated or Qualified 08/16/1995 4. FEI Number Applied For 2a. Mailing Address 2. Principal Place of Business P.O. Box 6 Not Applicable 55 South Suite, Apt. #, etc. 26 \$8.75 Additional Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 27 \$5.00 May Be City & State Election Campaign Financing City & State Florida <u>ens</u>acda Trust Fund Contribution Added to Fees Pensacolo 8. This corporation has liability for intangible tax under s 199.032, Country Country ☐ Yes ☐ No Florida Statutes 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name Street Address (P.O. Box Number is Not Acceptable) JESMONTH, RICHARD E **B2** 217-A E. INTENDENCIA STREET 83 PENSACOLA FL 32501 Zip Code City 85 84 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. DATE (NOTE: Registered Agent signature required when reinstaling) Signature typed or printed name of registered agent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. Addition Change DELETE 1. 1 TITLE D TITLE 1.2 NAME NAME LENN, DAVID 1.3 STREET ADDRESS 55 SOUTH "B" STREET STREET ADDRESS PENSACOLA FL 32501 1.4 CITY-ST-ZIP CITY - ST - ZIP Change Addition 2. 1 TITLE TITLE 2.2 NAME ALFORD, ERIC TODD NAME 2.3 STREET ADDRESS 3183 CREIGHTON ROAD STREET ADDRESS 2.4 CITY - ST - ZIP PENSACOLA FL 32504 CITY-SI-ZIP Change ■ Addition ☐ DELETE 3 1 TITLE TITLE 3.2 NAME **BURT, CARL SCOTT** NAME 3.3 STREET ADDRESS 6344 JASON DRIVE STREET ADDRESS MILTON FL 32570 34 CITY - ST - ZIP CiTY-ST-ZiP Addition Change T DELETE 4.1 TITLE TiTLE 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIP CITY-S1-ZIP ■ Addition ☐ Change ☐ DELETE 5 1 TITLE THUE **53 STREET ADDRESS** STREET ADDRESS 5.4 CITY-ST-ZIP CiTY-ST-ZiP Change ■ Addition DELETE 8 1 TITLE TPLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 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 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 cath; 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 3 if changed, or on an attachment with an address.

SIGNATURE: ST NATURE AND TYPED OR

Daytinie Phone #

CR2E034 (12/95)