


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 15, 2004 8:00 am
Secretary of State

04-15-2004 90015 038 ***158.75

DOCUMENT # P95000067182	
--------------------------------	---

1. Entity Name
ATLANTIC COAST CONSTRUCTION AND DEVELOPMENT, INC.

Principal Place of Business

8730 US HWY ONE
MICCO, FL 32976

Mailing Address

8730 US HWY ONE
MICCO, FL 32976

2. Principal Place of Business

730 Commerce Center Dr.

3. Mailing Address

730 Commerce Center Dr.

Suite, Apt. #, etc.

#C

Suite, Apt. #, etc.

#C

City & State

Sebastian Florida

City & State

Sebastian Florida

Zip

32958

Country

USA

Zip

32958

Country

USA

04132004

Chg-P

CR2E034 (10/03)

4. FEI Number

65-0604157

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**PALADIN, JOSEPH
6830 S HWY A1A
MELBOURNE, FL 32951**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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 reissuing)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	VP	<input type="checkbox"/> Delete
NAME	PALADIN CROSSMAN, AMY	
STREET ADDRESS	8355 DYNASTY DRIVE	
CITY-ST-ZIP	BOCA RATON, FL 33304	
TITLE	S	<input type="checkbox"/> Delete
NAME	PALADIN, MICHELE	
STREET ADDRESS	6830 S HWY A1A	
CITY-ST-ZIP	MELBOURNE BEACH, FL 32951	
TITLE	P	<input type="checkbox"/> Delete
NAME	PALADIN, JOSEPH	
STREET ADDRESS	6830 S HWY A1A	
CITY-ST-ZIP	MELBOURNE BEACH, FL 32951	
TITLE	TD	<input type="checkbox"/> Delete
NAME	PALADIN, MICHELE	
STREET ADDRESS	6830 S HWY A1A	
CITY-ST-ZIP	MELBOURNE BEACH, FL 32951	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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:

Michele Paladin *Michele Paladin*

4/13/04

(772) 589-9706

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #