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

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000012992

1. Corporation Name

COASTAL COMPUTER TECHNOLOGY, INC.

	, COMPUTER TECHNOLOG			<u> </u>				
Principal Place	of Business	Mailing Address			4 18811883 WS 18418 Bellet 48444 6			
		P O BOX 1837						
FORT WALTON BEACH FL 32547		FORT WALTON BEACH FL 32549		DO NOT WE	RITE IN THIS SP	PACE		
. •		US			3. Date Incorporated or Qualifer	d		٠.
					02/07/1996			
		2a. Mailing Address		<u> </u>	4. FEI Number			ed For
2. Principal Pla	ace of Business	26			59-3363174			Applicable
Suite, Apt. #	t etc	Suite, Apt. #, etc.			5. Certifcate of Status Desired	×	\$8.75 Add	
_	+, -	27						
City & State		City & State		,	6. Election Campaign Financing	9 🗆	\$5.00 M Added to	
23	•	28			Trust Fund Contribution			1603
دع Zip	Country	Zip	Country	1	8. This corporation owes the co	urrent year intan T	gibie ∐Yes 🖈	No
24	25	29	30		Personal Property Tax. 10. Name and Address of Nev			` —
	9. Name and Address of Curre	nt Registered Agent	81	Name	IV. Name and Address of Nev		-	
•		D3120301	81	ì	<u> </u>			
HAMILTON, CARL T.SR.		AN 1753	82	Street Add	ress (P.O. Box Number is Not Acce	ptable)		
CO 1090 N. BEAL PARKWAY			0.5	<u> </u>	・	9374 (216 8445, 13	Tidd HSI	2 F 13 13 1
FOR	T WALTON BEACH FL 32547		83	1	人族。 网络约翰克 多层键 新成 《報》是首日的 克二素的医验验	描述描述		
			84	City	An I have been	FL	85 Zip Co	ode
					the state this statement for t		hanging its r	egistered
office or n	egistered agent, or both, in the State	of Florida, Such change was a	authorized by	y the corporati	ion's board of directors. I hereby ac	cept the appoint	illeitt as ieg	ISICICO
office or n agent. I a SIGNATURE	im lamiliar with, and accept the owns		E: Registered Ag		poration submits this statement for toon's board of directors. I hereby ac	DATE		
agent. i a	Signature, typed or printed name of registered ag	pent and title if applicable. (NOT	E: Registered Ag	ent signature requin	ed when reinstating) ADDITIONS/CHANGES TO	DATE		
agent. I a SIGNATURE	Signature, typed or printed name of registered ag	ent and title if applicable. (NOT	E: Registered Ag 13. 1.1 TITLE	ent signature requin		DATE	DIRECTOR	RS IN 12
SIGNATURE	Signature, typed or printed name of registered ag OFFICERS A	pent and title if applicable. (NOT	13. 1.1 TITLE 1.2 NAME	ent signature requin	ed when reinstating) ADDITIONS/CHANGES TO	DATE	DIRECTOR	RS IN 12
SIGNATURE 12. TITLE	Signature, typed or printed name of registered ag OFFICERS A D HAMILTON, CARL T SR. 1090 N. BEAL PARKWAY	nent and title if applicable. (NOT	E: Registered Ag 13. 1.1 TITLE 1.2 NAME 1.3 STRE	ent signature requin	ed when reinstating) ADDITIONS/CHANGES TO	DATE	DIRECTOR	RS IN 12
SIGNATURE 12. TITLE NAME	Signature, typed or printed name of registered ag OFFICERS A D HAMILTON, CARL T SR.	pent and title if applicable. (NOT NOT DIRECTORS DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STRE 1.4 CITY	ent signature requin	ed when reinstating) ADDITIONS/CHANGES TO	DATE	DIRECTOR	RS IN 12
SIGNATURE 12. TITLE NAME STREET ADDRESS	Signature, typed or printed name of registered ag OFFICERS A D HAMILTON, CARL T SR. 1090 N. BEAL PARKWAY FORT WALTON BEACH FL 32	pent and title if applicable. (NOT ND DIRECTORS DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STRE 1.4 CITY- 2.1 TITLE	ent signature requin	ed when reinstating) ADDITIONS/CHANGES TO	DATE	DIRECTOR ☐ Change	RS IN 12
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registered ag OFFICERS A D HAMILTON, CARL T SR. 1090 N. BEAL PARKWAY FORT WALTON BEACH FL 32 D HAWKINS, SANDRA LUCILLE	pent and title if applicable. (NOT ND DIRECTORS DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STRE 1.4 CITY- 2.1 TITLE 2.2 NAME	ent signature requin	ed when reinstating) ADDITIONS/CHANGES TO	DATE	DIRECTOR ☐ Change	RS IN 12
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature, typed or printed name of registered ag OFFICERS A D HAMILTON, CARL T SR. 1090 N. BEAL PARKWAY FORT WALTON BEACH FL 32 D HAWKINS, SANDRA LUCILLE 1090 N. BEAL PARKWAY	gent and title if applicable. (NOT NOT DIRECTORS DELETE 2547	13. 1.1 TITLE 1.2 NAME 1.3 STRE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STRE	ent signature requin	ed when reinstating) ADDITIONS/CHANGES TO	DATE	DIRECTOR ☐ Change	RS IN 12
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature, typed or printed name of registered ag OFFICERS A D HAMILTON, CARL T SR. 1090 N. BEAL PARKWAY FORT WALTON BEACH FL 32 D HAWKINS, SANDRA LUCILLE 1090 N. BEAL PARKWAY FORT WALTON BEACH FL 32	pent and title if applicable. (NOT NOT DELETE	E: Registered Ag	ent signature requin	ed when reinstating) ADDITIONS/CHANGES TO	DATE	DIRECTOR ☐ Change	RS IN 12
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Signature, typed or printed name of registered ag OFFICERS A D HAMILTON, CARL T SR. 1090 N. BEAL PARKWAY FORT WALTON BEACH FL 33 D HAWKINS, SANDRA LUCILLE 1090 N. BEAL PARKWAY FORT WALTON BEACH FL 33	gent and title if applicable. (NOT NOT DIRECTORS DELETE 2547	13. 1.1 TITLE 1.2 NAME 1.3 STRE 1.4 CITY- 2.1 TITLE 2.2 NAMI -2.3 STRE 2.4 CITY 3.1 TITLE	ent signature requin	ed when reinstating) ADDITIONS/CHANGES TO	DATE	O DIRECTOR Change	RS IN 12 Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE TITLE TITLE TITLE TITLE TITLE TITLE	Signature, typed or printed name of registered ag OFFICERS A D HAMILTON, CARL T SR. 1090 N. BEAL PARKWAY FORT WALTON BEACH FL 32 D HAWKINS, SANDRA LUCILLE 1090 N. BEAL PARKWAY FORT WALTON BEACH FL 32	pent and title if applicable. (NOT NOT DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STRE 1.4 CITY 2.1 TITLE 2.2 NAME 2.3 STRE 2.4 CITY 3.1 TITLE 3.2 NAME	ent signature requin	ed when reinstating) ADDITIONS/CHANGES TO	DATE	O DIRECTOR Change	RS IN 12 Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registered ag OFFICERS A D HAMILTON, CARL T SR. 1090 N. BEAL PARKWAY FORT WALTON BEACH FL 32 D HAWKINS, SANDRA LUCILLE 1090 N. BEAL PARKWAY FORT WALTON BEACH FL 32	pent and title if applicable. (NOT NOT DIRECTORS DELETE 2547 DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STRE 1.4 CITY 2.1 TITLE 2.2 NAME 2.3 STRE 2.4 CITY 3.1 TITLE 3.2 NAME 3.3 STRI	ent signature requin	ed when reinstating) ADDITIONS/CHANGES TO	DATE	O DIRECTOR Change	RS IN 12 Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature, typed or printed name of registered ag OFFICERS A D HAMILTON, CARL T SR. 1090 N. BEAL PARKWAY FORT WALTON BEACH FL 32 D HAWKINS, SANDRA LUCILLE 1090 N. BEAL PARKWAY FORT WALTON BEACH FL 32	gent and title if applicable. (NOT NOT DIRECTORS DELETE 2547 DELETE 2547	13. 1.1 TITLE 1.2 NAME 1.3 STRE 1.4 CITY 2.1 TITLE 2.2 NAME 2.3 STRE 2.4 CITY 3.1 TITLE 3.2 NAM 3.3 STRI 3.4 CITY 3.4 CITY	ent signature requin	ed when reinstating) ADDITIONS/CHANGES TO	DATE	D DIRECTOR Change	RS IN 12 Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS	Signature, typed or printed name of registered ag OFFICERS A D HAMILTON, CARL T SR. 1090 N. BEAL PARKWAY FORT WALTON BEACH FL 32 D HAWKINS, SANDRA LUCILLE 1090 N. BEAL PARKWAY FORT WALTON BEACH FL 32	pent and title if applicable. (NOT NOT DIRECTORS DELETE 2547 DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STRE 1.4 CITY 2.1 TITLE 2.2 NAME 2.3 STRE 2.4 CITY 3.1 TITLE 3.2 NAME 3.3 STRE 3.4 CITY 4.1 TITLE	ent signature requin	ed when reinstating) ADDITIONS/CHANGES TO	OFFICERS AND	D DIRECTOR Change	RS IN 12 Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature, typed or printed name of registered ag OFFICERS A D HAMILTON, CARL T SR. 1090 N. BEAL PARKWAY FORT WALTON BEACH FL 32 D HAWKINS, SANDRA LUCILLE 1090 N. BEAL PARKWAY FORT WALTON BEACH FL 32	gent and title if applicable. (NOT NOT DIRECTORS DELETE 2547 DELETE 2547	13. 1.1 TITLE 1.2 NAME 1.3 STRE 1.4 CITY 2.1 TITLE 2.2 NAME 2.3 STRE 2.4 CITY 3.1 TITLE 3.2 NAM 3.3 STRI 3.4 CITY 4.1 TITLE 4.2 NAM	ent signature requin	ed when reinstating) ADDITIONS/CHANGES TO	OFFICERS AND	D DIRECTOR Change	RS IN 12 Addition Addition
AGENTURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP	Signature, typed or printed name of registered ag OFFICERS A D HAMILTON, CARL T SR. 1090 N. BEAL PARKWAY FORT WALTON BEACH FL 32 D HAWKINS, SANDRA LUCILLE 1090 N. BEAL PARKWAY FORT WALTON BEACH FL 32	gent and title if applicable. (NOT NOT DIRECTORS DELETE 2547 DELETE 2547	13. 1.1 TITLE 1.2 NAME 1.3 STRE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STRE 2.4 CITY 3.1 TITLE 3.2 NAM 3.3 STRI 3.4 CITY 4.1 TITLE 4.2 NAM 4.3 STR	ent signature requin	ed when reinstating) ADDITIONS/CHANGES TO	OFFICERS AND	D DIRECTOR Change	RS IN 12 Addition Addition
AGENTURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME NAME NAME NAME	Signature, typed or printed name of registered ag OFFICERS A D HAMILTON, CARL T SR. 1090 N. BEAL PARKWAY FORT WALTON BEACH FL 32 D HAWKINS, SANDRA LUCILLE 1090 N. BEAL PARKWAY FORT WALTON BEACH FL 32	pent and title if applicable. (NOT NOT DIRECTORS DELETE 2547 DELETE DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STRE 1.4 CITY 2.1 TITLE 2.2 NAME 2.3 STRE 2.4 CITY 3.1 TITLE 3.2 NAM 3.3 STRI 4.1 TITLL 4.2 NAM 4.3 STR 4.4 CITY 4.4 CITY 4.4 CITY 4.5 NAM 4.5 STR 4.4 CITY	ent signature requin	ed when reinstating) ADDITIONS/CHANGES TO	OFFICERS AND	D DIRECTOR Change	RS IN 12 Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Signature, typed or printed name of registered ag OFFICERS A D HAMILTON, CARL T SR. 1090 N. BEAL PARKWAY FORT WALTON BEACH FL 32 D HAWKINS, SANDRA LUCILLE 1090 N. BEAL PARKWAY FORT WALTON BEACH FL 32	gent and title if applicable. (NOT NOT DIRECTORS DELETE 2547 DELETE 2547	13. 1.1 TITLE 1.2 NAME 1.3 STRE 1.4 CITY 2.1 TITLE 2.2 NAME 2.3 STRE 2.4 CITY 3.1 TITLE 3.2 NAM 3.3 STRE 4.1 TITLE 4.2 NAM 4.3 STR 4.4 CITY 5.1 TITLE	ent signature requin	ADDITIONS/CHANGES TO	OFFICERS AND	DIRECTOR Change Change	Addition Addition Addition
AGENTURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registered ag OFFICERS A D HAMILTON, CARL T SR. 1090 N. BEAL PARKWAY FORT WALTON BEACH FL 32 D HAWKINS, SANDRA LUCILLE 1090 N. BEAL PARKWAY FORT WALTON BEACH FL 32	pent and title if applicable. (NOT NOT DIRECTORS DELETE 2547 DELETE DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STRE 1.4 CITY 2.1 TITLE 2.2 NAME 2.3 STRE 2.4 CITY 3.1 TITLE 3.2 NAM 3.3 STRE 4.1 TITLE 4.2 NAM 4.3 STR 4.4 CITY 5.1 TITLE 5.2 NAM	ent signature requin	ed when reinstating) ADDITIONS/CHANGES TO	OFFICERS AND	DIRECTOR Change Change	Addition Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature, typed or printed name of registered ag OFFICERS A D HAMILTON, CARL T SR. 1090 N. BEAL PARKWAY FORT WALTON BEACH FL 32 D HAWKINS, SANDRA LUCILLE 1090 N. BEAL PARKWAY FORT WALTON BEACH FL 32	pent and title if applicable. (NOT NOT DIRECTORS DELETE 2547 DELETE DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STRE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STRE 2.4 CITY 3.1 TITLE 3.2 NAM 3.3 STRI 3.4 CITY 4.1 TITLE 4.2 NAM 4.3 STR 4.4 CITY 5.1 TITLE 5.2 NAM 5.3 STRI 5.3 STRI 5.3 STRI 5.3 STRI 5.4 STRI 5.5 ST	ent signature requin	ADDITIONS/CHANGES TO	OFFICERS AND	DIRECTOR Change Change	Addition Addition Addition

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 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, with all other like empowered. CITY-ST-ZIP

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

TITLE

STREET ADDRESS

roder for Carl in

1000 机 机利 5477.00

TOTAL PERSON VERSEN MADE

DELETE

FILED

Jan 26, 1999 8:00am

Secretary of State

01-26-1999 90045 033 ***158.75