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

PROFIT CORPORATION ANNUAL REPORT

1997

CITY - ST - ZIP



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P96000023298 (8)

GULF COAST HOME CONSULTANTS, INC.

FILED Apr 28 1997 8:00am Secretary of State

Principal Place of Business Mailing Address 17706 LONG POINT DRIVE 17706 LONG POINT DRIVE REDINGTON SHORES FL 33706 REDINGTON SHORES FL 337				······································				
			¥		3. Date incorporateb or Qualified 03/11/1996	3a. Date	of Last R	eport
2. Principal Piace of Business		2a. Mailing Address	, · · · · · · · · · · · · · · · · · · ·		4. FEI Number	Applied For		
Suite, Apt	#.elc	Suite, Apt. #. etc.	Suite, Apt. #, etc.		59-3366319	CR 75 Additional		
22		27			Certificate of Status Desired		Fee Re	
City & Sta	te	City & State			6. Election Campaign Financing		\$5.00	May Be
23	Country	28	Count		Trust Fund Contribution		Added t	
Zip Country 25		Zip <b>29</b>	30		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes			
[24]	9. Name and Address of Cui		[30]		10. Name and Address of New Re			
ZIMI	MER, STEVEN P		. 8	1 Name				
17706 LONG POINT DRIVE			. B	2 Street Ad	iress (P.O. Box Number is Not Acceptable)			<del></del>
RED	INGTON SHORES FL 33708							
			8	3			•	
1			8	4 City		FL	85 Zip (	Code
11. Pursuant	to the provisions of Sections 607	1502 and 607 1508. Florida Sta	tutes, the abo	ve-named co	orporation submits this statement for the p		hanoing it	is registered
office or	registered agent, or both, in the Si	ate of Florida, Such change wa	s authorized	by the corpor	ration's board of directors. I hereby accep	the appoi	ntment as	registered
SIGNATURE	5005)	ingalions or, occilon oor loods,	i ionoa piatat	<b>G</b> 3.	4)	20/1	1つ	
				gent signature rec	quired when reinstating)	DATE	<del></del> _	
12.	·	AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC			
THLE	ZIMMER, STEVEN P	DELETE	1.1 TITLE	- 1		L.	_ Change	Addition
NAME STREET ADORESS	17706 LONG POINT DRIVE		1.2 NAM	ET ADDRESS				
CITY - ST - ZIP	REDINGTON SHORES FL 33	708	1.4 City					
TITLE	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	DELETE	2.1 TITLE				Change	Addition
NAME			22 NAM	E				
STREET ADDRESS			2.3 STRE	ET ADDRESS		•		
CITY - \$1 - 712			2. 4 CITY	-ST-ZIP				
TIPLE		☐ DELFTE	3.1 TITLE			L	Change	Addition
NAME.			3.2 NAM	- 1				
STREET ADDRESS				ET ADDRESS				i
CHY-ST-7IP TITLE		DELETE	3.4. CITY 4.1 TITLE				Change	Addition
NAME	<b>,</b>	proces	4. 2 NAM	ı		-	Dilango L	L. Foulder
STREET ADDRESS			3	ET ADDRESS				
City-St-ZiP			4.4 CITY	1				
TITLE		☐ DELETE	5.1 TITLE				Change	Addition
NAME			5.2 NAM					
STHEET ADDRESS	į		5.3 STRE	ET ADORESS				
Crty-S1-ZiP		····	54 CITY					
TITLE		DELETE	61 TITLE				Change	Addition
NAMÉ			6.2 NAM	- 1				
STREET ADDRESS			63 STRE	ET ADDRESS				

14. I do 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 oriector 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.

SIGNATURE:

6.4 CITY-ST-ZIP

SIGNATURE AND TOPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

Date

Dayting Phone is