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

**PROFIT** CORPORATION **ANNUAL REPORT** 

1998

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FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9600 1. Corporation Name GULF COAST EQUIPMENT, INC. P96000084541 (7)

## **FILED** Apr 20 1998 8:00am Secretary of State



Principal Place of Business  2929 LANGLEY AVE SUITE 201 PENSACOLA FL 32504 US  2. Principal Place of Business 21 Suite, Apt. #, etc.  22 City & State 23		Mailing Address 2929 LANGLEY AVE SUITE 201 PENSACOLA FL 32504 US  28. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip Country			DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified 10/10/1996  4. FEI Number					
Zip 24	Country	Zip 29	30			<ol><li>This corporation Personal Propert</li></ol>	owes or has paid by Tax due June 30			angibie ] No
27	9. Name and Address of Current		-	•	1	0. Name and Add	<del>*</del>			
292 SUI PEN	ROLL, DAVID B D LANGLEY AVE TE 201 SACOLA FL 32504 D the provisions of Sections 607.0502	and 607 1508 Florida Statute	81 82 83 84	Street	COMPAGE	tion submits this sta	TARLAGE	FL 85	Zip C	Code OSO1 s registered
office or re agent. I ar SIGNATURE	glistered agent, or both, in the State of agent, and accept the obligation of the state of the state of the state of the obligation of the state of the obligation of the state of the stat	of Florida Such change was autions of, Section 607.0505, Flor	uthorized by ida Statute Registered Agr	y the corp s.	poration'	s board of directors	. I hereby accept t	DATE	ent as	registered
12. TITLE	OFFICERS AND	DELETE	13. 1.1 Title		<del></del>	ADDITIONS/CHAI	TOLO TO OFFICE		hange	Addition
NAME Street address City-St-Zip	CARROLL, DAVID B 2929 LANGLEY AVE SUITE 20 PENSACOLA FL		1.2 NAME 1.3 STREET 1.4 CITY - S 2.1 TITLE					C	•	Addition
NAME STREET ADDRESS CITY-ST-ZIP	ANDERSON, MIKE 2929 LANGLEY AVE STE 201 PENSACOLA FL	_ uttit	2 2 NAME	F AODRESS ST-ZIP					iango	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CST CARROLL, KATIE 2929 LANGLEY AVE STE 201 PENSACOLA FL	☐ DELETE	3.1 TITLE 3.2 NAME 3.3 STREET 3.4. City-	i address St-zip				c	nange	Addition
TITLE NAME STREET ADDRESS		☐ DELETÉ	4.1 TITLE 4. 2 NAME	r address				□ C	nange	Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS	:	DELETE	5.1 TITLE 5.2 NAME	I ADDRESS		. <u></u>		c	hange	Addition
TITLE NAME STREET ADDRESS		☐ DELETE	6.1 TITLE 6.2 NAME	I ADDRESS		14.000.000		□ c	hange	Addition
Indicated officer or	ertify that the information supplied will on this annual report or supplemental director of the corporation or the rece or Block 13 if changed, or on an atlac	annual report is true and accu iver or trustee empowered to e	r the exemp	otion state	nnatura s	shall have the same.	lenal effect as it m	iade under oa	ain in	arıam an