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

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **P96000092650** (6)

COASTAL MARKETING, INC.

FILED May 07 1997 8:00am Secretary of State

Principal Place of Business Mailing Address 1380 WHITE MARSH LN UNIT 102 FT MYERS FL 33912 FT MYERS FL				-	
		9		 Date Incorporated or Qualified 11/07/1996 	3a, Date of Last Report
21 80° Sulte, Apt.		Suite, Apt. #, etc.	4 Duniels Pk	ty 4. ELI Number 12765 5. Certificate of Status Desired	Applied For Not Applicable \$8.75 Additional Fee Required
City & State	A	City & State 28 Fort M.	yers, Kl.	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 24 339/2	Country 25 US 9. Name and Address of Current	29 93912	Country 30 45	8. This corporation has liability to Florida Statutes 10. Name and Address of New F	☐ Yes 📈 No
HALL, CHRISTOPHER W 13080 WHITE MARSH LN UNIT 102 FT MYERS FL 33912			 81 Name 82 Street Ad 83 84 City 	dress (P.O. Box Number is Not Accepte	
office or re agent. I as SIGNATURE	to the provisions of Sections 607,0502 egistered agent, or both, in the State of manifer with, and accept the obligat standard, typed or profed name of registred agent.	f Horida, Such change was ons of, Section 607.0505, FI	authorized by the corpor	rporation submits this statement for the ation's board of directors. I hereby accounted when registrical.	purpose of changing its registered
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFF	ICERS AND DIRECTORS IN 12
TITLE NAME STREET ADDRESS	DPVS HALL, CHRISTOPHER W 13080 WHITE MARSH LN UNIT	□ DELETE 102	11 TITLE 12 NAME 13 STREET ADDRESS		Change Addit-on
CITY-ST-ZIP TITLE NAME	FT MYERS FL 33912 T HALL, CHRISTOPHER W 13080 WHITE MARSH LN	☐ DELETE	14 CITY - ST - 7/P 21 TIPLE 22 NAME		☐ Change ☐ Addition
STREET ADORESS CITY-ST-ZIP	FT MYERS FL 33912	DELETE	2 3 STREET ADDRESS 2 4 CHY-ST-7IP		Change Addition
NAME STREET ADDRESS CITY-ST-ZIP		[_] v.u.v.	3 1 TITLE 32 NAME 33 STREET ADDRESS 34. CITY-ST-ZIF		E cominge E vonit-au
TITLE NAME STREET ADDRESS		☐ DELETE	4 1 TITLE 4 2 NAME 4 3 STREET ADDRESS		☐ Change ☐ Addition
CITY-ST-ZIP TITLE NAME	and the state of t	☐ DELETE	4 4 CITY-ST-7IP 5 1 TITLE 5 2 NAME		Change Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME		DELETE	5.3 STREET ADDRESS 5.4 CHY-ST-7IP 6.1 TITLE 6.2 NAME		Change Addition
STREET ADDRESS CITY-ST-ZIP			63 STREEL ADDRESS 64 CITY - ST - ZIP		

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 director of the corporation or the receiver or frustee compowered 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.