

WARNING FEE AFTER MAY 18, 1998 \$50.00

ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE
Sanjay D. Ghorokar
Secretary of State
DIVISION OF CORPORATIONS

FILED
Feb 11 1998 8:00am
Secretary of State

DOCUMENT # P96000099939 (6)

1. Corporation Name
COLTMAN, INC.

Principal Place of Business

Mailing Address

3100 REGATTA RD.
NAPLES FL 34103
US

3100 REGATTA RD.
NAPLES FL 34103
US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 3100 Regatta Rd.

23 City & State

27 City & State
Naples, FL.

24 Zip Country

28 Zip Country
34103 USA

3. Date Incorporated or Qualified

12/09/1996

4. FEI Number 59-3434853
APPLIED FOR

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

D'AGOSTINO, LOUIS D
QUARLES & BRADY
4501 TAMiami TrL. N., STE. 300
NAPLES FL 34103

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE C
NAME FRANK D'AGOSTINO
STREET ADDRESS 3100 REGATTA RD.
CITY-ST-ZIP NAPLES FL

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE P
NAME DOMENIC D'AGOSTINO
STREET ADDRESS 3100 REGATTA RD.
CITY-ST-ZIP NAPLES FL

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE VP
NAME JOHN D'AGOSTINO
STREET ADDRESS 3100 REGATTA RD.
CITY-ST-ZIP NAPLES FL

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE S
NAME ANNE D'AGOSTINO
STREET ADDRESS 3100 REGATTA RD.
CITY-ST-ZIP NAPLES FL

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE T
NAME MARIO D'AGOSTINO
STREET ADDRESS 3100 REGATTA RD.
CITY-ST-ZIP NAPLES FL

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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.

SIGNATURE:

Frank D'Agostino

2-2-98 941-403-4070

CR2E034 (10/97)