

# 2000 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Aug 11, 2000 8:00 am**  
**Secretary of State**

08-11-2000 90001 001 \*\*\*550.00

**DOCUMENT #** P960 00100882

1. Entity Name

COASTAL OUTDOOR ADVERTISING

Principal Place of Business

Mailing Address

2. Principal Place of Business  
 1018 THOMASVILLE RD.

3. Mailing Address  
 14306 BLENHEIM PLACE

Suite, Apt. #, etc.  
 SUITE 200-B

Suite, Apt. #, etc.

City & State  
 TALLAHASSEE, FL

City & State  
 HOUSTON, TX

Zip  
 32303

Country  
 USA

Zip  
 77095

Country  
 USA

4. FEI Number  
 76-0521734

Applied For  
 Not Applicable

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

LOKMANYA, INC.  
 dba/ PACIFIC PHOTOCOPY & RESEARCH  
 227 N. BRONOUGH ST., SUITE 7400  
 TALLAHASSEE, FLORIDA 32301

7. Name and Address of New Registered Agent

Name  
 JACK LOCKLIN, JR.  
 Street Address (P.O. Box Number is Not Acceptable)  
 LOCKLIN & JONES, P.A.  
 77 JONES AVENUE  
 City  
 MILTON FL Zip Code  
 32570

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE JACK LOCKLIN, JR., REG. AGENT 06/30/00

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2000 Fee will be \$550.00**  
**Make Check Payable to Department of State**

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

11. OFFICERS AND DIRECTORS

TITLE PRESIDENT  
 NAME LARRY E. POTTER  
 STREET ADDRESS 14306 BLENHEIM PLACE CT.  
 CITY - ST - ZIP HOUSTON, TX 77095

TITLE  
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 STREET ADDRESS  
 CITY - ST - ZIP

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12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
 NAME  
 STREET ADDRESS  
 CITY - ST - ZIP

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13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: LARRY E. POTTER  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

06/30/00 281-550-2649  
 Date Daytime Phone #