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

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

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000102399 (8)

COEEN STORET INC

| direct officer ino.                  |                                  |  |
|--------------------------------------|----------------------------------|--|
|                                      |                                  |  |
| Principal Place of Business          | Mailing Address                  |  |
| €13 ST JOHNS AVE<br>PALATKA FL 32177 | P.O. BOX 626<br>PALATKA FL 32178 |  |
|                                      |                                  |  |
| 2, Principal Place of Business       | 2a. Mailing Address              |  |
| 21                                   | 26                               |  |
| Suite, Apt. #, etc.                  | Suite, Apt. #, etc.              |  |

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

DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/19/1996 4. FEI Number Applied For 59-3417954 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Country Zip 8. This corporation owes or has paid the current year Intangible X Yes 30 Personal Property Tax due June 30. 24 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent HINKLE, RICHARD C 81 613 ST JOHNS AVE 82 Street Address (P.O. Box Number is Not Acceptable) PALATKA FL 32177 83 84 City 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, typical or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Change TITLE 11 TITLE HINKLE, RICHARD C L. allen 1.2 NAME NAME 613 ST JOHNS AVE STREET ADDRESS 1,3 STREET ADDRESS PALATKA FL 32177 1.4 CITY - ST- ZIP CITY-ST-ZIP Change DELETE Addition 2.1 TITLE KEENE, SHAWN M NAME 22 NAME 613 ST JOHNS AVE STREET ADDRESS 2.3 STREET ADDRESS PALATKA FL 32177 CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE Change Addition 3.1 TITLE TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 3.4. DITY-ST-ZIP Change Addition TITLE DELETE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition 5.11000 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-\$T-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition 6.1 TITLE TITLE NAME 6.2 NAME 6 3 STREET ADDRESS 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 addre