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FILED
Jun 22 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000002144 (8)

1. Corporation Name

ADVANCED COASTAL CONSTRUCTION, INC.

Principal Place of Business

MERCHANTS WALK, SUITE 212
4400 HIGHWAY 20 EAST
NICEVILLE FL 32578

Mailing Address

MERCHANTS WALK, SUITE 212
4400 HIGHWAY 20 EAST
NICEVILLE FL 32578

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/08/1997

4. FEI Number

59-3419301

Applied For

Not Applicable

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

2. Principal Place of Business

21 155 Crystal Bch Dr

Suite, Apt #, etc

22 Suite 101

City & State

23 Destin FL

Zip

24 32541

Country

25 Okaloosa

2a. Mailing Address

26 155 Crystal Bch Dr

Suite, Apt #, etc

27 Suite 101

City & State

28 Destin FL

Zip

29 32541

Country

30 Okaloosa

9. Name and Address of Current Registered Agent

PETERMANN, RICHARD P
25 NE WALTER MARTIN ROAD
FORT WALTON BEACH FL 32548

10. Name and Address of New Registered Agent

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: Type or print name of the individual agent and the corporation (if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME POATE, CHRIS
STREET ADDRESS 4441 TURNBERRY PLACE
CITY-ST-ZIP NICEVILLE FL 32578

TITLE ☒ DELETE

NAME SCHOENFELD, BURGHARD
STREET ADDRESS 4400 HWY 20 E, STE 212
CITY-ST-ZIP NICEVILLE FL 32578

TITLE ☒ DELETE

NAME FLYNT, CHARLOTTE
STREET ADDRESS 804 ST. KITTS COVE
CITY-ST-ZIP NICEVILLE FL 32578

TITLE ☒ DELETE

NAME KRONE, DIETER
STREET ADDRESS WURZERSTRASSE 25
CITY-ST-ZIP 53175 BONN, GERMANY

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Vice President ☐ Change ☒ Addition

1.2 NAME Charles Craig Cole
1.3 STREET ADDRESS 4204 Brittany Ct
1.4 CITY-ST-ZIP Pensacola, FL 32504

2.1 TITLE Director ☐ Change ☒ Addition

2.2 NAME F.J. Munter GmbH & Co. KG
2.3 STREET ADDRESS Postfach 200 414
2.4 CITY-ST-ZIP 53134 Bonn Germany

3.1 TITLE President ☒ Change ☐ Addition

3.2 NAME Christopher H. Poate
3.3 STREET ADDRESS 1395 Sunset Beach Drive
3.4 CITY-ST-ZIP Niceville, FL 32578

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

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

Christopher H. Poate 850-650-5571

CR2E034 (10/97)