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Secretary of State

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PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000016565

1. Corporation Name
WEBSTER COATINGS, INC.



Principal Place of Business

5818 SOMERSET DR
PENSACOLA FL 32526
US

Mailing Address

5818 SOMERSET DR
PENSACOLA FL 32526
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/17/1997

4. FEI Number

59-3441428

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 the current year Intangible

Personal Property Tax.

☐

Yes

☐

No

2. Principal Place of Business

2a. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

WEBSTER, STEPHEN P
5818 SOMERSET DRIVE
PENSACOLA FL 32526

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	D	1.1 TITLE	DIRECTOR
NAME	WEBSTER, STEPHEN P	1.2 NAME	JOHN A. FUSS
STREET ADDRESS	5818 SOMERSET DRIVE	1.3 STREET ADDRESS	105 MAGNOLIA ST. Apt. 7
CITY-ST-ZIP	PENSACOLA FL 32526	1.4 CITY-ST-ZIP	PENSACOLA, FL 32570
TITLE	D	2.1 TITLE	DIRECTOR
NAME	SULLIVAN, EMILIE S	2.2 NAME	CHARLES D. RUSSOM
STREET ADDRESS	5818 SOMERSET DRIVE	2.3 STREET ADDRESS	2355 BERG ST.
CITY-ST-ZIP	PENSACOLA FL 32526	2.4 CITY-ST-ZIP	PENSACOLA, FL 32514
TITLE	P	3.1 TITLE	
NAME	WEBSTER, STEPHEN P	3.2 NAME	
STREET ADDRESS	5818 SOMERSET DR	3.3 STREET ADDRESS	
CITY-ST-ZIP	PENSACOLA FL 32526	3.4 CITY-ST-ZIP	
TITLE	D	4.1 TITLE	
NAME	PITTS, WILLIAM	4.2 NAME	
STREET ADDRESS	9040 BRUNSON DRIVE	4.3 STREET ADDRESS	
CITY-ST-ZIP	PENSACOLA FL 32513	4.4 CITY-ST-ZIP	
TITLE	D	5.1 TITLE	
NAME	BROWN, ROBERT	5.2 NAME	
STREET ADDRESS	5818 SOMERSET DR	5.3 STREET ADDRESS	
CITY-ST-ZIP	PENSACOLA FL 32526	5.4 CITY-ST-ZIP	
TITLE	V	6.1 TITLE	
NAME	WEBSTER, PETER	6.2 NAME	
STREET ADDRESS	159 SAYLES ST	6.3 STREET ADDRESS	
CITY-ST-ZIP	LOWELL MA 01851	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, with all other like empowered.

SIGNATURE:

SIGNATURE OF REGISTERED AGENT
STEPHEN P WEBSTER
4-5-99

Date

Daytime Phone #

850-941-0896

CR2E034 (1/1/98)