

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000069716

1. Entity Name

COASTAL SALES & DEVELOPMENT, INC.

FILED
Jan 30, 2001 8:00 am
Secretary of State

01-30-2001 90167 035 ***150.00

Principal Place of Business

Mailing Address

~~13118 WEXFORD HOLLOW N.~~
~~JACKSONVILLE FL 32224~~

~~13118 WEXFORD HOLLOW N.~~
~~JACKSONVILLE FL 32224~~

4420 Catheys Club Ln
Jacksonville FL 32224

4420 Catheys Club Ln
Jacksonville FL 32224

2. Principal Place of Business

3. Mailing Address

4420 Catheys Club Lane

4420 Catheys Club Lane

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Jacksonville, Florida

Jacksonville, Florida

Zip

32224

Country

Duval

Zip

32224

Country

Duval

4. FEI Number 65-0779985

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MESCH, LAUREN
~~13118 WEXFORD HOLLOW N.~~
~~JACKSONVILLE FL 32224~~

Name

Street Address (P.O. Box Number is Not Acceptable)

4420 Catheys Club Lane

City

Jacksonville

FL

Zip Code
32224

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

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, 2001 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D
NAME MESCH, LAUREN ☐ Delete
STREET ADDRESS 13118 WEXFORD HOLLOW N.
CITY-ST-ZIP JACKSONVILLE FL 32224

TITLE ☐ Change ☐ Addition
NAME 4420 Catheys Club Lane
STREET ADDRESS Jacksonville, FL 32224
CITY-ST-ZIP

TITLE D
NAME MESCH, MICHAEL D ☐ Delete
STREET ADDRESS 13118 WEXFORD HOLLOW N.
CITY-ST-ZIP JACKSONVILLE FL 32224

TITLE ☐ Change ☐ Addition
NAME 4420 Catheys Club Lane
STREET ADDRESS Jacksonville, FL 32224
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)

001831