2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000083735

1. Entity Name

FIRST COAST SECURITY, INC.

FILED
02 APR 16 PM 12:47
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business	Mailing Address
316 Boating Club Rd. St. Augustine, FL 32095	316 Boating Club Rd. St. Augustine, FL 32095

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3472387 ☐ 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
Hall, Charles E. Jr. 77 Almeria Street St. Augustine, FL 32084	Name Hall, Charles E. Jr. Street Address (P.O. Box Number is Not Acceptable) 77 Almeria Street City St. Augustine FL Zip Code 32084

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] 4/1/02
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) ☒

[illegible]

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 NAME STREET ADDRESS CITY-ST-ZIP	PVST Gary Croyle 316 Boating Club Rd. St. Augustine, FL 32095 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition 900005449649--3 -05/03/02--01044--025 ****150.00 ****150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

CR2E034 (11/00)

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] 4-5-02 904-829-9802
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

R
DADE/BROWARD REALTY, INC.
16772 N.E. 5TH AVE. NORTH MIAMI BEACH FL. 33162
(305) 655-3591 FAX (305) 655-3594

Miami, March 28th, 2002

Division of Corporations
P.O. Box 6327
Tallahassee, Fl. 32314

900005449599--0
-05/03/02--01044--008
****150.00 ****150.00

Re: Document # P94000054676
FEI # 65-0507744

Be advised I mailed the completed form on 3/27/02 with somebody else's check by mistake.
Please disregard that check because I already stopped payment on it.
Enclosed the correct check.

Thank you,

Edouard-U-St-Hilaire