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

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998

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DOCUMENT # P9700089775 (5) 1. COPPORTATION NAME COASTAL HOLDINGS GROUP, INC.								1 (20 11 /6 0) 512 (6 21) (801) 20 111 30 111	AANI ARITT VAND ABITE VAND		11 1 110 †	
Principal Place of Business 44 FRANKLIN AVE PONTE VEDRA BEACH FL 32082			Mailing Address 44 FRANKLIN AVE PONTE VEDRA BEACH FL 32082				DO NOT WRI	TE IN THIS SPACE		 	1	
2. Principal Place of Business 21 7751 BELFORT PKWY			26. Mailing Address 26. 7751 BELFORT PKYY			Y	10/20/1997 4. FEI Number 59 -34 723	10	Applie Not Ap	d For oplicable		
Suite, Apt #, e	110		Suite, Apt #, etc. 27 SUITE 110					5. Certificate of Status Desired	1 1 ***	5 Addi Requir		
City & State 23 JACKSONVILLE FL			City & State 28 JACKSONVILLE FL				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees					
Zip 3225	56 25	Country DUVAL	7ipi 29 32256	Cour		UVA	L	This corporation owes or has personal Property Tax due Jur	· · · · · ·	Intangi No		}
9	, Name and	Address of Current	Registered Agent					10. Name and Address of New F	Registered Agent]
CONVERY, SAMUEL V NI						Name]
44 FRANKLIN AVE					B2	Street A	Address	(P.O. Box Number is Not Accept	able)			1
PONTE VEDRA BEACH FL 32082					Sirect / lad			() DOX TO THE TO THE POOR				
]				Ī	83							Ì
				- 1	84	City				D Code		-
				l	84	City			FL 85 Z	ip Cool	В	1
11. Pursuant to the office or regis	ne provisions stered agent,	of Sections 607.0502 or both, in the State of	and 607.1508, Florida Statutes of Florida. Such change was au	s, the ab	ove-	named o	corpore	tion submits this statement for the s board of directors. I hereby acc	purpose of changin ept the appointment	g its regi as regi	gistered stered	İ
SIGNATURE	William	ted name of negotiered agen	rez					then reinstating)	2/9/98			
12.	Michael Marco or Turi	OFFICERS AND		13.	rgent	aigridiore i	required w	ADDITIONS/CHANGES TO OFF	CERS AND DIRECT	OBS IN	112	6
	DP		DELETE	11 TIT	LE			HEDITIONO CHANGES TO OFF	Chang		Addition	CR2E034 (10/97)
	CONVERY, SAMUEL V III		-	1.2 NAME		į						4
STREET ADDRESS 44 FRANKLIN AVE						DORESS						8
CITY-ST-ZIP PONTE VEDRA BEACH FL 32			082		Y-\$1-							띯
TITLE DST			DELETE 2.1 TI						Change Ch	e L	Addition	Ö
NAME	GAINES, WI	LLIAM K		22 NA	ME]	GAL	NES WILLIAM K.				Ì
STREET ADDRESS 3655 HAVERSHAM ROAD #A227				2.3 STREET ADDRESS			188	NES WILLIAM K. 7-1 BEACH AVÉ				1
CITY-ST-ZIP ATLANTA GA 30328					2. 4 CITY-ST-ZIP			NTIC BCH FL 3223	3			ì
TITLE			DELETE	3.1 7/1		-			☐ Chang	e L	Addition	1
NAME			_	32 NA		}						1
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CITY-ST-ZIP					3.4. CITY-ST-ZIP							1
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NAME					4. 2 NAME							1
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CITY-ST-ZIP				4.4 CIT								ŀ
TITLE			DELETE	5.1 TIT		-"	-		Chang	e L	Addition	

14. Thereby 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 or an attachment with an address.

6.1 TITLE

6.2 NAME

5.3 STREET ADDRESS 54 CITY-ST-ZIP

6.3 STREET ADDRESS 64 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME STREET ADDRESS

DELETE

Addition

Change

FILED

Feb 12 1998 8:00am

Secretary of State