

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

FILED  
Apr 10 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P97000108038 (5)

1. Corporation Name

INTERCOASTAL FINANCIAL SERVICES CORP.

Principal Place of Business

Mailing Address

701 ST. GILES CT.  
PALM BEACH GARDENS FL 33418

701 ST. GILES CT.  
PALM BEACH GARDENS FL 33418

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/24/1997

4. FEI Number

65-0816892

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		2a. Mailing Address	
21 777 South Flagler Drive Suite, Apt. #, etc.	26 777 South Flagler Drive Suite, Apt. #, etc.		
22 8th Floor - West Tower City & State	27 8th Floor - West Tower City & State		
23 West Palm Beach, FL. Zip Country	28 West Palm Beach, FL. Zip Country		
24 33401 25 USA	29 33401 30 USA		

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SHAFFER, ROGER L JR.  
2201 CORPORATE BLVD., NW, SUITE 105  
BOCA RATON FL 33431

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	D
NAME	WARREN, ROY G	1.2 NAME	Warren, Roy G.
STREET ADDRESS	701 ST. GILES CT.	1.3 STREET ADDRESS	1128 Country Club Drive
CITY-ST-ZIP	PALM BEACH GARDENS FL 33418	1.4 CITY-ST-ZIP	North Palm Beach, FL. 33408
TITLE		2.1 TITLE	P/D
NAME		2.2 NAME	Zentz, Roy C.
STREET ADDRESS		2.3 STREET ADDRESS	16846 128th Trail
CITY-ST-ZIP		2.4 CITY-ST-ZIP	Jupiter, FL. 33478
TITLE		3.1 TITLE	S/T/D
NAME		3.2 NAME	O'Leary, Marilyn R.
STREET ADDRESS		3.3 STREET ADDRESS	701 St. Giles Court
CITY-ST-ZIP		3.4 CITY-ST-ZIP	Palm Beach Gardens, FL. 33418
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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:

Maurice R. O'Leary

3/23/98

401-820-9405

CR2E034 (10/97)