

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



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

FILED
Apr 27, 1999 8:00 am
Secretary of State

04-27-1999 90104 015 ***150.00

DOCUMENT # P98000019085

1. Corporation Name

INTERCOASTAL DISTRIBUTORS OF NORTH FLORIDA, INC.



Principal Place of Business

1740 SOUTH SEGRAVE STREET
DAYTONA FL 32119

Mailing Address

1740 SOUTH SEGRAVE STREET
DAYTONA FL 32119

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/20/1998

4. FEI Number

59-3504022

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

21 10255 FORTUNE PARKWAY

2a. Mailing Address

26

Suite, Apt. #, etc.

22 BLDG. 5 SUITE 100

Suite, Apt. #, etc.

27

City & State

23 JACKSONVILLE FL

City & State

28

Zip

24 32256

Country

25

Zip

29

Country

30

9. Name and Address of Current Registered Agent

BRIM, JOHN
2425 SOUTH VOLUSIA AVE, B-2
OFANGE CITY FL

10. Name and Address of New Registered Agent

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

TITLE PD ☐ DELETE

NAME MAHONEY, JOHN T.
STREET ADDRESS 4245 S. ATLANTIC AVE
CITY-STATE-ZIP WILBUR BT THE SEA FL

TITLE SD ☐ DELETE

NAME WATSON, JOBBIE R JR
STREET ADDRESS 1250 WOODMERE
CITY-STATE-ZIP WINTER PARK, FL

TITLE TD ☐ DELETE

NAME STONE, STEPHEN J
STREET ADDRESS 4038 S. PENINSULA DR.
CITY-STATE-ZIP WILBUR BT THE SEA, FL

TITLE D ☐ DELETE

NAME JAMES M. MC GINLEY
STREET ADDRESS 4234 S. ATLANTIC AVE
CITY-STATE-ZIP WILBUR BT THE SEA, FL

TITLE D ☐ DELETE

NAME PATRICK J. MAHONEY
STREET ADDRESS 1885 BERKELEY CT
CITY-STATE-ZIP MAITLAND, FL

TITLE D ☐ DELETE

NAME WILLIAM J. PATIN JR
STREET ADDRESS 30 ZEPHYR LILY TR
CITY-STATE-ZIP PALM COAST, FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D ☐ Change ☐ Addition

1.2 NAME STEPHEN W. PRICE
1.3 STREET ADDRESS 62 TALLIAWOOD ROAD
1.4 CITY-STATE-ZIP JACKSONVILLE, FL

2.1 TITLE D ☐ Change ☐ Addition

2.2 NAME DOUGLAS P. MAHONEY
2.3 STREET ADDRESS 10107 BENINGTON
2.4 CITY-STATE-ZIP TAMPA, FL

3.1 TITLE D ☐ Change ☐ Addition

3.2 NAME PHILLIP R. SOARD
3.3 STREET ADDRESS 251 TALMEDA TR
3.4 CITY-STATE-ZIP MAITLAND, FL

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-STATE-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-STATE-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-STATE-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 another like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

John T. Mahoney 4/22/99 904/761-7454

CR2E034 (1/98)