

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 28, 2001 8:00 am
Secretary of State
 03-28-2001 90219 002 ***150.00

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DOCUMENT # P99000030262	
1. Entity Name COAST REALTY SERVICES, INC.	
Principal Place of Business 141 DEER LAKE DRIVE PONTE VEDRA BEACH FL 32082	Mailing Address 141 DEER LAKE DRIVE PONTE VEDRA BEACH FL 32082
2. Principal Place of Business 141 DEER LK DR. Suite, Apt. #, etc.	3. Mailing Address 141 DEER LAKE DR. Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State PONTE VEDRA BEACH, FL	City & State PONTE VEDRA BEACH, FL	4. FEI Number 59-3571343	Applied For <input type="checkbox"/> Not Applicable
Zip 32082	Country USA	Zip 32082	Country USA
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent BOYER, GERRY A 141 DEERLAKE DRIVE PONTE VEDRA BEACH FL 32082		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	

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 *Gerry A Boyer* (NOTE: Registered Agent signature required when reinstating) DATE 3/26/01
 Signature, typed or printed name of registered agent and title, if applicable.

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐ **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 NAME STREET ADDRESS CITY-ST-ZIP	P BOYER, GERRY A 141 DEER LAKE DRIVE PONTE VEDRA BEACH FL 32082 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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: *Gerry A Boyer* 3/26/01 904-707-4847
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)