

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000085762

1. Entity Name

COASTAL CLEANING COMPANY

FILED
Feb 20, 2000 8:00 am
Secretary of State

02-20-2000 90049 047 ***150.00

Principal Place of Business

1631 IBIS WAY
ST. GEORGE ISLAND FL 32328

Mailing Address

1631 IBIS WAY
ST. GEORGE ISLAND FL 32328-2253

2. Principal Place of Business

1631 IBIS way

3. Mailing Address

P.O. Box 940

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

St George Island, FL

City & State

Eastpoint, FL

Zip

32328-2253

Country

USA

Zip

32328

Country

USA

4. FEI Number

58-2133385

☒ 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

YONCLAS, NICHOLAS ESQ.
140-D FIRST ST. WEST
ST. GEORGE ISLAND FL 32328

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

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) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 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	D	<input type="checkbox"/> Delete
NAME	TULLY, DANIELLE H	
STREET ADDRESS	1631 IBIS WAY	
CITY-ST-ZIP	ST. GEORGE ISLAND FL 32328	
TITLE		<input type="checkbox"/> Delete
NAME		
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NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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:

Danielle H. Tully
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

02/15/00

Date

850-927-2118

Daytime Phone #

CR2E034 (9/99)