

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 08, 2002 8:00 am
Secretary of State

09-08-2002 90126 045 ***550.00

DOCUMENT # P99000107582

1. Entity Name

COAST TO COAST HURRICANE PROTECTION INC.

Principal Place of Business

**9171 CARIBBEAN BOULEVARD
 MIAMI FL 33157**

Mailing Address

**9171 CARIBBEAN BOULEVARD
 MIAMI FL 33157**

2. Principal Place of Business

110 SAND LAKE RD.

Suite, Apt. #, etc.

3. Mailing Address

110 SAND LAKE RD.

Suite, Apt. #, etc.

City & State

Interlachen

City & State

Interlachen

4. FEI Number

65-0967238

Applied For

Not Applicable

Zip

32148-7214

Country

USA

Zip

32148-7214

Country

USA

5. Certificate of Status Desired

☐ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

**GRAHAM, KENNY A
 9171 CARIDDEAN BLVD
 MIAMI FL 33157**

7. Name and Address of New Registered Agent

Name **Kenneth A. Graham**

Street Address (P.O. Box Number is Not Acceptable)

110 SAND LAKE RD.

City **Interlachen**

FL

Zip Code

32148-7214

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, type or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Kenneth H. A. Graham

9/5/02

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 \$550.00
 After September 13, 2002 Fee will be \$750.00
 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

TITLE ☐ Delete
 NAME **PSTD**
 STREET ADDRESS **GRAHAM, KENNETH A**
 CITY-ST-ZIP **9171 CARIBBEAN BOULEVARD
 MIAMI FL 33157**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
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 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
 NAME
 STREET ADDRESS **110 SAND LAKE RD.**
 CITY-ST-ZIP **Interlachen, FL 32148-7214**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Kenneth H. A. Graham

9/5/02 306-681-0106

CR2E034 (4/02)