

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

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 24 1997 8:00am
Secretary of State

DOCUMENT # S08801

(0)

1. Corporation Name

COASTAL FIRST INSURANCE AGENCY, INC.



Principal Place of Business

Mailing Address

P.O. BOX 07400
FT MYERS FL 33919

P.O. BOX 07400
FT MYERS FL 33919-0391

3. Date Incorporated or Qualified

10/17/1990

3a. Date of Last Report

01/31/1996

2. Principal Place of Business

2a. Mailing Address

21 P.O. Box 10660
Suite, Apt. #, etc.

26 P.O. Box 10660
Suite, Apt. #, etc.

4. FEI Number

59-0302472

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 has liability for intangible tax under s. 199.032,
Florida Statutes

☐ Yes ☒ No

22 City & State
23 Pensacola, Fla

27 City & State
28 Pensacola, Fla

24 32509 25 Escambia 29 32524 30 Escambia

9. Name and Address of Current Registered Agent

LAMB, ROBERT C.
13561 EAGLE RIDGE DR.
STE. #1027
FT. MYERS FL 33919

10. Name and Address of New Registered Agent

B1 Name Robert C. Lamb
B2 Street Address (P.O. Box Number is Not Acceptable)
4301 Creighton Rd
STE. #102
B3
B4 City Pensacola FL B5 Zip Code 32509

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 authorized and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

Robert C. Lamb

3/18/97

12. OFFICERS AND DIRECTORS

D
LAMB, ROBERT C.
13561 EAGLE RIDGE DR., #1027
FT MYERS FL 33912

☐ DELETE

NAME
STREET ADDRESS
CITY- ST- ZIP
TITLE

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SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY- ST- ZIP
2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY- ST- ZIP
3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY- ST- ZIP
4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY- ST- ZIP
5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY- ST- ZIP
6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY- ST- ZIP

☒ Change ☐ Addition

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3/18/97

After Apr. 1, 1997
941-474-6224