FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT **1996**

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

DOCUMENT # S16239 (3)

1. Corporation Name
COASTAL DECK CO.

Principal Place of Business	Mailing Address
1856 WILBUR AVENUE VERO BEACH FL 32960-5570	1856 WILBUR AVENUE VERO BEACH FL 32960-5570

2. Principal Place of Business	2a. Mailing Address
21 1858 Commerce Ave.	26 1858 Commerce Ave.
Suite, Apt. #, etc. 22 Vero Beach FL	Suite, Apt. #, etc. 27 Vero Beach FL
City & State 23 32960	City & State 28 32960
Zip 24 / Country 25 Indian River	Zip 29 / Country 30 Indian River

3. Date Incorporated or Qualified: **11/30/1990**
3a. Date of Last Report: **04/26/1995**
4. FEI Number: **65-0235220** ☐ 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

9. Name and Address of Current Registered Agent

CLAGHORN, JOY C.
1856 WILBUR AVENUE
VERO BEACH FL 32960

10. Name and Address of New Registered Agent

81 Name: CLAGHORN, Joy C
82 Street Address (P.O. Box Number is Not Acceptable): 1858 Commerce Ave.
83 Vero Beach
84 City: FL 85 Zip Code: 32960

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: Joy C. Claghorn, Secy-Treas. 1/23/96
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	☐ DELETE	1.1 TITLE	☒ Change ☐ Addition
NAME	CLAGHORN, CHARLES D.		1.2 NAME	
STREET ADDRESS	1856 WILBUR AVE.		1.3 STREET ADDRESS	1858 Commerce Ave.
CITY-ST-ZIP	VERO BEACH FL		1.4 CITY-ST-ZIP	
TITLE	STD	☐ DELETE	2.1 TITLE	☒ Change ☐ Addition
NAME	CLAGHORN, JOY C.		2.2 NAME	
STREET ADDRESS	1856 WILBUR AVE.		2.3 STREET ADDRESS	1858 Commerce Ave.
CITY-ST-ZIP	VERO BEACH FL		2.4 CITY-ST-ZIP	
TITLE		☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME			3.2 NAME	
STREET ADDRESS			3.3 STREET ADDRESS	
CITY-ST-ZIP			3.4 CITY-ST-ZIP	
TITLE		☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME			4.2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP			4.4 CITY-ST-ZIP	
TITLE		☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP			5.4 CITY-ST-ZIP	
TITLE		☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	
CITY-ST-ZIP			6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE: Joy C. Claghorn Joy C. Claghorn 1/23/96 (407) 778-3325
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (12/95)