

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

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

FILED
Apr 27 1998 8:00am
Secretary of State

DOCUMENT # S55156 (1)

1. Corporation Name

COATES, DAVIS & ASSOCIATES, INC.



Principal Place of Business

Mailing Address

9700 KOGER BLVD
STE 108
ST PETERSBURG FL 33702
US

9700 KOGER BLVD
STE 108
ST PETERSBURG FL 33702
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/28/1991

4. FEI Number

59-3069053

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

☒

Yes

☐

No

2. Principal Place of Business

21 9600 KOGER BLVD

Suite, Apt. #, etc.

22 231

City & State

23 ST. PETERSBURG FL

Zip

24 33702

Country

25 USA

2a. Mailing Address

26 9600 KOGER BLVD

Suite, Apt. #, etc.

27 231

City & State

28 ST. PETERSBURG FL

Zip

29 33702

Country

30 USA

9. Name and Address of Current Registered Agent

DAVIS, WILLIAM L
9700 KOGER BLVD
STE 108
ST PETERSBURG FL 33702

10. Name and Address of New Registered Agent

81 Name

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

9600 KOGER BLVD SUITE 231

83

84

ST. PETERSBURG

FL

85

Zip Code

33702

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

4/21/98

12. OFFICERS AND DIRECTORS

TITLE D
NAME COATES, T. H.
STREET ADDRESS 10135 YACHT CLUB DRIVE
CITY-ST-ZIP TREASURE ISLAND FL

DELETE

TITLE PSD
NAME DAVIS, W. L.
STREET ADDRESS 664 TALLAHASSEE DR NE
CITY-ST-ZIP ST PETERSBURG FL

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. 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 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:

William L. Davis

WILLIAM L. DAVIS

4/21/98

(413) 570-8888

CR2E034 (10/97)