

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

FILED

Jan 24 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # **S81793** (9)

1. Corporation Name

**TWIN COAST INTERIORS, INC.**

Principal Place of Business

**801 SANLANDO RD  
ALTAMONTE SPRINGS FL 32714**

Mailing Address

**801 SANLANDO RD  
ALTAMONTE SPRINGS FL 32714-1802**



3. Date Incorporated or Qualified

**09/23/1991**

3a. Date of Last Report

**02/23/1996**

4. FEI Number

**59-3085061**

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

2. Principal Place of Business

**21** Suite, Apt. #, etc.

**22** City & State

**23** Zip

**25** Country

2a. Mailing Address

**26** Suite, Apt. #, etc.

**27** City & State

**28** Zip

**30** Country

9. Name and Address of Current Registered Agent

**LEISTER, EDITH  
801 SANLANDO RD  
ALTAMONTE SPRINGS FL 32714**

10. Name and Address of New Registered Agent

**81** Name

**GEORGE LEISTER**

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

**801 SANLANDO ROAD**

**83**

**84** City

**ALTAMONTE SPRINGS**

**FL**

**85** Zip Code

**32714**

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

**GEORGE LEISTER**

**1/20/97**

12. OFFICERS AND DIRECTORS

**D** ☒ DELETE  
**LEISTER, GEORGE**  
**627 ASHBERRY LN**  
**ALTAMONTE SPGS FL**

**D** ☐ DELETE  
**GONCALO, KARMEN**  
**4501-13TH WAY NE**  
**ST PETERSBURG FL**

**D** ☐ DELETE  
**SOMMER, JANET**  
**2850 LANCASTER CT**  
**APOPKA FL**

☐ DELETE

☐ DELETE

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

14. I do 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 a 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

**KARMEN J. GONCALO**

**1-20-97**

**407-862-0177**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

CR2E034 (9/96)