

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Feb 27, 2001 08:00 AM
Secretary of State

DOCUMENT # S98534
 1. Entity Name
GULF COAST LIGHTING MAINTENANCE, INC.

Principal Place of Business 12880 AUTOMOBILE BLVD #G CLEARWATER FL 337624711 US		Mailing Address P O BOX 1908 PINELLAS PARK FL 34664 US	
---	--	--	--

2. Principal Place of Business 4505 131ST AVE. N. #12	3. Mailing Address P O BOX 1908 Suite, Apt. #, etc.
---	---

City & State CLEARWATER FL	City & State PINELLAS PARK FL	4. FEI Number 59-3092055	Applied For <input type="checkbox"/>
Zip 33762	Country US	Zip 33780	Country US

5. Certificate of Status Desired **\$8.75** Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

STEVENS PEGGY A
12880 AUTOMOBILE BLVD #G
CLEARWATER FL 33762 US

7. Name and Address of New Registered Agent

Name
MILLER EDWARD S
Street Address (P.O. Box Number is Not Acceptable)
4505 131ST AVE. N
#12
City
CLEARWATER FL Zip Code
33762

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.

SIGNATURE EDWARD S. MILLER DATE 02/27/2001
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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 \$150.00
After MAY 1, 2001 Fee will be \$550.00
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 D	NAME HAVERLAND ROSEMARY	<input type="checkbox"/> Delete
STREET ADDRESS 12880-A AUTOMOBILE BLVD	CITY-ST-ZIP CLEARWATER FL 33762	
TITLE VPD	NAME PUCKETT BRENDA L	<input checked="" type="checkbox"/> Delete
STREET ADDRESS 12880-A AUTOMOBILE BLVD	CITY-ST-ZIP CLEARWATER FL 33762	
TITLE S	NAME STEVENS PEGGY A	<input type="checkbox"/> Delete
STREET ADDRESS 12880-A AUTOMOBILE BLVD	CITY-ST-ZIP CLEARWATER FL 33762	
TITLE P	NAME HAVERLAND GARRY J	<input type="checkbox"/> Delete
STREET ADDRESS 12880-A AUTOMOBILE BLVD	CITY-ST-ZIP CLEARWATER FL 33762	
TITLE	NAME	<input type="checkbox"/> Delete
STREET ADDRESS	CITY-ST-ZIP	
TITLE	NAME	<input type="checkbox"/> Delete
STREET ADDRESS	CITY-ST-ZIP	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	CITY-ST-ZIP	
TITLE	NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	CITY-ST-ZIP	
TITLE	NAME	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	CITY-ST-ZIP	
TITLE	NAME	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	CITY-ST-ZIP	
TITLE	NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	CITY-ST-ZIP	
TITLE	NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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: GARRY J. HAVERLAND P DATE 02/27/2001
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (11/00)