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

PROFIT CORPORATION **ANNUAL REPORT**



LLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT # V27290

C & D ENVIRONMENTAL COATING, INC.

(8)
10	,

FILED Mar 19 1997 8:00am Secretary of State



Principal Place	o of Business	Mailing Address	· · - 				
988 BEA LANE JACKSONVILLE US		986 BEA LANE JACKSONVILLE FL 32220- US	1010				
					3. Date Incorporated or Qualified 04/03/1992	3a. Date of Last Report 04/05/1996	
2. Principal Pl	ace of Business	28. Mailing Address			4. FEI Number	Applied For	
21		26			59-3125168	Not Applicable	D .
Suite, Apt.		Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State	•	City & State			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip	Country	Уф	Count	lry	8. This corporation has kability for i		
24	25	[29]	30			Yes No	
0.15	9. Name and Address of Currer	it Registered Agent		Name	10. Name and Address of New Re	gistered Agent	}
	PTON, C. J.		Ľ	Name			
	BEA LANE KSONVILLE FL 32220		8	Street Add	ress (P.O. Box Number is Not Acceptab	ile)	
UNO	MONITULE IE OEEEO		8	33			
			i.	34 City		■ 85 Zip Code	- {
						FL 3 7 7 7 7 7 7 7 7 7	
office or re	to the provisions of Sections 607.050 ogistered agent, or both, in the State m familiar with, and accept the oblig	of Horida, Such change was a	authorized	by the corporal	poration submits this statement for the p tion's board of directors. I hereby accep	urpose of changing its registered at the appointment as registered	1
SIGNATURE	<u> </u>				and the second of the second o		
12.	Signature, typed or profed Lame of registerics age OFFICERS AN		F Registered /	ygent signahae regu-	activities reliscating) ADDITIONS/CHANGES TO OFFIC	DATE CERS AND DIRECTORS IN 12	1
TITLE	P	DILLIE	1.1 1011	E		Change Addition	ō
NAME	DEMPSEY, JAMES A		1.2 NAM	16			2
STREET ADDRESS	986 BEA LANE		1.3 S1Ri	ET ADDRESS			ļ
CITY-ST-ZIP	JACKSONVILLE FL 32220	<u></u>	1.4 CITY	- \$1 - <i>20</i> °			<u>2</u>
TıTL€	٧	☐ DELETE	2.1 101	i l		Change Additio/i	
NAME	COLE, DONALD R JR		2.2 NAM	H			
STREET ADDRESS	RT. 1 BOX 688 A			EL ADDRESS	<i>2</i> 4		
CITY-ST-ZIP	BRYCEVILLE FL 32009	DELETE		Y-S1-74°		Change Addition	
TITLE		[] DOLL II	3 1 111.1	i		Charge [] Addition	,
NAME OTDEET ADODESC			3.2 NAM	ſ			1
STREET ADDRESS				F1 ADDRESS			
CITY-ST-ZIP TITLE		DOLLETE	3.4 GHZ 41 HHz	7 - \$1 - 7IP		☐ Change ☐ Addition	;-}
NAME		• • •	4. 2 NAA				
STREET ADDRESS				EL ADDRESS			
CiTY-ST-ZiP			1	- \$1 - 7IF			
TITLE		DELETE	5.1 TITU			Change Addition	i
NAME			5.2 NAM	ıt İ			
STREET ADDRESS			5.3 S1RE	F' ADDRESS			
CITY-\$1-ZIP			5.4 CITY	- \$1 - ZIP			
TITLE		DELETE	6 (100)			Change Addition	
NAME			G 2 NAM	1			
STREET ADDRESS			6.3 S1Ri	ET ADORESS			
CITY-ST-ZIP			6.4 CITY	· \$1 - 7(P			

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 armord 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 truster 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: Orner a Namuseur - Provident

3/12/97

904-625-3964