FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED

95 MAY 23 AM 10:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **V34277** **(6)**

1. Corporate Name
COASTLINE ELECTRIC COMPANY OF PENSACOLA, INC.

Principal Place of Business	Mailing Address
10851 CHEMSTRAND ROAD PENSACOLA FL 32514	10851 CHEMSTRAND ROAD PENSACOLA FL 32514

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **05/07/1992**
3a. Date of Last Report: **05/01/1994**

2. Principal Place of Business (21) / Suite, Apt. # etc. (22) / City & State (23) / Zip (24) / County (25)
2a. Mailing Address (26) / Suite, Apt. # etc. (27) / City & State (28) / Zip (29) / County (30)

4. FEI Number: **59-3127698** ☐ 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	10. Name and Address of New Registered Agent
LAMY, SCOTT 10851 CHEMSTRAND ROAD PENSACOLA FL 32514	81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Section(s) 607.1005 and 607.1008, 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 (and on behalf of the corporation I accept the obligations of Section(s) 607.0505, Florida Statutes).

SIGNATURE

12. OFFICERS AND DIRECTORS	13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS, ETC.
TITLE: DP NAME: LAWY, SCOTT STREET ADDRESS: 10851 CHEMSTRAND RD CITY-ST-ZIP: PENSACOLA FL	☐ Change ☐ Addition
TITLE: V NAME: NELLUMS, MICHAEL STREET ADDRESS: 5402 PIPELINE RD CITY-ST-ZIP: PENSACOLA FL	☐ Change ☐ Addition
TITLE: T NAME: KELSON, LENORE STREET ADDRESS: 1510 W. CYPRESS ST. CITY-ST-ZIP: PENSACOLA FL	☐ Change ☐ Addition
TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:	☐ Change ☐ Addition
TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:	☐ Change ☐ Addition
TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:	☐ Change ☐ Addition

14. I/We hereby certify that the information supplied with this report is voluntarily furnished and 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 annual report is true and accurate and that my signature shall bear 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 1 or Block 12 if changed or added above with an address.

SIGNATURE: Scott B. Lamy 5/18/95 904-474-6391
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL OFFICER OR DIRECTOR

0389788 CP