

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 8, 1995.
AMOUNT DUE ON OR BEFORE 8/8/95: \$325 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)**

**PROFIT
CORPORATION
ANNUAL REPORT
1995**



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

**APPROVE
AND
FILED**

95 JUL -5 AM

SECRETARY OF
TALLAHASSEE, FL

DOCUMENT # V57667 (0)

1. Corporation Name

GULF COAST INDUSTRIAL SERVICES, INC.

Principal Place of Business

CYTEC
1801 CYNARD RD
MILTON FL 32571
US

Mailing Address

C/O JOHNNY L. BAGGETT
5457 CHIPPER LANE
PACE FL 32571
US

DO NOT WRITE IN THIS SPACE

3. Date of Incorporation or Qualification 08/14/1992	3a. Date of Last Report 03/25/1994
4. FEI Number 59-3141387	Agreed For First Application
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
6. Election (Check appropriate boxes) Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
7. This information is subject to change by amendment Florida Statutes ☒ Yes ☐ No	

2. Mailing Address	2a. Mailing Address
21. Suite, Apt. # etc.	26. 4000 HWY 90
22. City, State	27. SUITE E
23. PACE, FL.	28. PACE, FL.
24. 32571	29. 32571
	30. SANTA ROSA

9. Name and Address of Current Registered Agent

BAGGETT, JOHNNY L.
5457 CHIPPER LANE
PACE FL 32571

10. Name and Address of New Registered Agent **corrected**

81. Name BAGGETT, JOHNNY L.
82. Street Address (P.O. Box acceptable for incorporation) 6663 PINE BLOSSOM Rd.
83. City MILTON
84. State FL
85. Zip Code 32570

11. I, the undersigned, the president of the corporation, and each officer of the corporation, hereby certify that the above named corporation submits this statement for the purpose of changing its registered agent as provided in the Florida Statutes. Such change was authorized by the corporation's board of directors, if needed, as set forth in the application as registered agent in the Florida Statutes.

12. OFFICERS AND DIRECTORS	13. AGENTS FOR SERVICE OF PROCESS AND EMPLOYEES
NAME: D BAGGETT, JOHNNY L.	NAME: 6663 PINE Blossom Rd.
ADDRESS: 5457 CHIPPER LANE	CITY: MILTON, FL.
STATE: VS	ZIP: 32570
NAME: BAGGETT, CYNTHIA	NAME: 6663 PINE Blossom Rd.
ADDRESS: 5457 CHIPPER LANE	CITY: MILTON, FL.
STATE: VS	ZIP: 32570
NAME:	NAME:
ADDRESS:	ADDRESS:
STATE:	STATE:
NAME:	NAME:
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NAME:	NAME:
ADDRESS:	ADDRESS:
STATE:	STATE:
NAME:	NAME:
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ADDRESS:	ADDRESS:
STATE:	STATE:

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in the Florida Statutes. I further certify that the information is not used for the purpose of reporting or governmental oversight or for any other purpose and that my report is not used for any other purpose. I further certify that the information is not used for the purpose of reporting or governmental oversight or for any other purpose and that my report is not used for any other purpose. I further certify that the information is not used for the purpose of reporting or governmental oversight or for any other purpose and that my report is not used for any other purpose.

SIGNATURE: *Cynthia O. Baggett* **6-29-95 994-9451**